.

**Example questionnaire for people using nurse agencies**

This may be care homes, individuals, families/carers of individuals, NHS wards, or health and social care partnerships.

The questions below are based on the Care Inspectorate’s quality framework for nurse agency services, which sets out the Care Inspectorate’s expectations about how care services should improve outcomes for people. The headings are from the key areas in the framework.

We would welcome your feedback on our nurses and our service in general. Your honest feedback is very important to us, and we value all comments.  Please tell us how we are doing and where we can make improvements, even if you feel these are only small things.  If you have feedback not covered by the questions below, please use the box at the end of the form to tell us about this.  Alternatively, you can speak to us directly.

**Practice which promotes and respects people’s human rights**

1 - I see agency nurses treating people with compassion, dignity and respect.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very good**  | **Excellent**  |
|   |    |    |    |    |    |

2 - The agency nurses demonstrate the principles of the health and social care standards in their everyday practise.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very good**  | **Excellent**  |
|   |    |    |    |    |    |

**People are fully consulted and have comprehensive and well-planned agreements about the service to be provided**

3 - There is a clear agreement in place that details what I require from the agency and what the agency will provide.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very good**  | **Excellent**  |
|   |    |    |    |    |    |

**People receive healthcare from professionals who are skilled, knowledgeable, and well matched to people’s needs**

4 - The agency undertakes an assessment of my needs to ensure they can appropriately match nurses to the role / service.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very good**  | **Excellent**  |
|   |    |    |    |    |    |

**People experience safe infection prevention and control practice and procedure**

5 – The agency nurses appear confident and knowledgeable about infection prevention and control practices.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very Good**  | **Excellent**  |
|   |    |    |    |    |    |

**Leaders are responsive to feedback and use learning to improve**

 6 – I am regularly asked to give feedback about the practise of individual nurses and the agency in general.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very Good**  | **Excellent**  |
|   |    |    |    |    |    |

 7 – I feel that the agency listens and is responsive to any feedback I give or concerns raised.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very Good**  | **Excellent**  |
|   |    |    |    |    |    |

**Staff have the right knowledge and development to care for and support people.**

8 - The agency nurses that are placed have the right skills, experience and knowledge.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very good**  | **Excellent**  |
|   |    |    |    |    |    |

**Effective governance provides assurances that the agency is well led.**

9 – The management team provide good support and there is good communication with the agency.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very good**  | **Excellent**  |
|   |    |    |    |    |    |

10 – The agency maintains good contact to ensure the service being provided

continues to meet my needs.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Unsatisfactory**  | **Weak**  | **Adequate**  | **Good**  | **Very good**  | **Excellent**  |
|   |    |    |    |    |    |

If there are specific areas you think we could improve on, please provide some detail below.

If there is anything else you’d like to add, please use the box below.