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**Self-Evaluation tool**

Name of service:

Name of manager:

Date of self-evaluation:

**Quality indicator 1.2: People’s health and wellbeing benefits from their care and support**

**How are we doing?**

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

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| Unsatisfactory | Weak | Adequate | Good | Very Good | Excellent |
|  |  | X |  |  |  |

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

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

People experience safe infection prevention and control practice and procedure.

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

**How do we know?**

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| **What did we do?**  **We asked for staffs views** – 6 questionnaires and a discussion at a team meeting (3 staff present)  **We asked people using the service for their views using a questionnaire (32 responses) and also contacted some via phone to further discuss their responses.**  **We asked all of our agency nurses** **to complete a short questionnaire (47 responses)**  **We audited 10 files to look at the assessments of need completed and ensured they matched the competencies of the agency nurses supplied to them.**  **We audited training files for 10 agency nurses to ensure they had completed the relevant infection prevention and control training and updates.**  ***What did we find?***  We found that 4 out of 10 needs assessmentshad not been updated in over a year and required a review. The format of the assessment was changed last year (based on feedback from some of the services we provide nurses to and is now much more detailed and comprehensive. The old format is not as effective at identifying some of the competencies required to appropriately match staff and the information may be out of date.  People told us (6 out of 32 questionnaire responses from people using the service) that on occasion we had sent a nurse to them who did not have the appropriate skills and experience but that this had improved since the change to the assessment process last year.  7 (out of 47 responses) of our agency nurses told us that they had been matched to roles that they did not feel they had the appropriate skills or experience for.  11 Nurses reported themselves as only adequate in terms of people experiencing safe infection prevention and control practice and procedure. When we looked at training records, 5 nurses had not completed the online updates in relation to current practice in infection prevention and control. 22 of the responses from those using the service also rated us as adequate in this area with many commenting that they did not know what the agencies training and policy was and where else the nurses may have been working. |

**What are we going to do now?**

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| We will audit all needs assessments and ensure that they are on the updated format and they have been reviewed within the past year. We will also cross check the outcomes of the assessments with all nurses skills and experience to ensure people have the right competencies and the matching process is improved. We will also add staff matching as a specific question to our feedback questionnaires that are completed after each shift to we can identify where there are any concerns earlier.  We will audit all training files to identify where there are any gaps and ask nurses to address these as a matter of priority. We will also send out an email to nurses to gauge confidence levels around infection prevention and control (IPC) practice to identify if there is further support or training that we can provide.  To try and improve confidence in those who use the service about IPC, we will share our current policy that identifies our approach including how we mitigate risks of cross infection and the training and support we provide to our nurses.  We aim to achieve only grades of ‘good’ or above when we repeat this self-evaluation in 4 months’ time. |

Logo, company name

Description automatically generated

**Next steps: developing your improvement plan**

The manager retains overall responsibility for completing and reviewing the improvement plan. This should be in a format you can share. Aim to review this plan regularly and make the information accessible so you can share it with the people who experience your care, their families, staff and others involved with your service. It is essential that they are part of the review process and that they feel some ownership of the plan.

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| **Outcome**  What do we want to achieve? | **Actions**  How are we going to do it? | **Timeframe**  When do we want this to be completed or next reviewed? | **Person responsible**  Who is doing each action or responsible for ensuring it gets completed? | **Where are we now?**  What have we achieved, and what has prevented us from doing what we wanted? |
| Improve how effective we are at matching nurses to roles.  Be better informed where nurses are not appropriately matched to roles | Ensure all needs assessments are in the most up to date format.  Ensure all assessments are reviewed annually.  Encourage those using the service and nurses themselves to make contact where nurses are not matched appropriately.  Add a specific question about matching to the feedback form. | Review in 16 weeks – repeat the questionnaires. | Manager to audit all assessments.  Coordinator to ensure review dates are entered into quality assurance activities plan.  Manager to put out communication to people using the service and nurses to encourage feedback.  Coordinator to ensure all feedback is monitored by office staff so issues can be addressed |  |
| Ensure people are confident that there is safe and effective infection prevention and control practice and procedures. | Audit training files to identify gaps.  Contact nurses with training gaps and set timeframe for completion as a priority.  Contact all nurses to get feedback about any IPC concerns or additional training and support required.  Send out communication to all those using the service and nurses to inform of the agency’s IPC approach and policy | Review on a three-monthly basis | Manager and coordinator |  |