Care Nexus – Staff Survey Report 2026

Survey: Staff Survey
Survey Opened: 22/04/2026
Survey Period: One month
Frequency: Annual
Maximum Score: 4 Stars
Approximate Responses: (111 out of 150 employee)
Status: Survey reviewed and improvement actions implemented

1. Executive Summary

The 2026 Staff Survey demonstrates an overall positive level of staff confidence across Care Nexus. The survey opened on **22 April 2026** and remained open for one month. The Staff Survey will be completed **annually** as part of Care Nexus's ongoing quality assurance and continuous improvement arrangements.

The survey was shared with employees through a **link/code generated through the QCS policy system**, which all employees have access to. The survey was developed to measure staff feedback and organisational performance against the **five key questions used by the Care Quality Commission (CQC): Safe, Effective, Caring, Responsive and Well-led**.

Strong results were achieved in safeguarding, medication management, staff knowledge and skills, training and development, dignity, privacy and responding to concerns. The highest results were 95%, achieved in safeguarding responsibilities, medication training and safe administration, staff knowledge and competence, and continuous professional development.

The survey also identified opportunities for improvement, particularly around communication, continuity of care, staff briefing, involvement in service development and consistent operational practice.

Following management review of the findings, a structured three-part training programme was completed on **19 August 2026** for staff involved in customer services. This included **Office Administrators, Compliance Officers, HR Management, Care Coordinators, Field Care Supervisors and all On-Call Managers**.

The programme focused on roles and responsibilities, identified service shortfalls and opportunities for improvement, policy and guidance, and competency monitoring to support a consistent standard of service.

The survey findings, feedback and improvement actions have subsequently been **shared with all staff**.

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2. Key Strengths

Area	4-Star Result
Understanding safeguarding responsibilities	95%
Medication training and safe administration	95%
Knowledge, qualifications and skills for role	95%
Training and continuous professional development	95%
Concerns and complaints taken seriously	93%
Medication competency assessments	90%
Service User privacy and confidentiality	90%
Comprehensive induction and shadowing	90%
Communication/non-discrimination with Service Users	90%

The results provide positive assurance that staff understand important areas of safe care delivery and their individual responsibilities.

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3. Areas Identified for Improvement

Management focused on the lower-scoring areas and themes rather than treating every result below 100% as a concern.

Key Finding	4-Star Result	Improvement Focus
Service Users kept informed when staff change at short notice	69%	Communication and coordination
Service Users introduced to staff providing their care	76%	Continuity and introductions
Enough appropriately skilled staff to provide reliable, unrushed care	77%	Staffing and rota management

Key Finding	4-Star Result	Improvement Focus
Staff covering visits are fully briefed	77%	Handover and Care Plan awareness
Staff asked for views and included in service changes	78%	Staff engagement
Communication between management and staff	81%	Internal communication
Staff involved in organisational aims/objectives	81%	Staff involvement

These findings were reviewed by **Lucritia Jones, Registered Manager, and Golam Wayes, Managing Director**, to identify where management and operational practice could be strengthened.

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4. Action Taken – Three-Part Staff Training

Following review of the survey findings, staff involved in customer services completed a structured three-part retraining programme on **19 August 2026**.

Staff participating included **Office Administrators, Compliance Officers, HR Management, Care Coordinators, Field Care Supervisors and all On-Call Managers**.

Part 1 – Training Manager: Roles and Responsibilities

The Training Manager provided training covering individual roles, responsibilities and accountability. Staff were reminded of what is expected within their roles and the importance of appropriate communication, escalation, documentation and following agreed organisational processes.

The purpose was to ensure that staff clearly understood their responsibilities and how their individual actions contribute to safe, effective and consistent service delivery.

Part 2 – Registered Manager: Shortfalls and Service Improvement

Lucritia Jones, Registered Manager, reviewed identified shortfalls and opportunities to improve the service arising from monitoring and staff feedback.

Staff were reminded of relevant organisational policies and how these should be applied in practice. Supporting guidance was used to reinforce expectations and provide staff with clear information to refer to when carrying out their responsibilities.

The session reinforced the importance of learning from findings and using feedback and monitoring as opportunities to improve the quality of the service rather than viewing monitoring solely as a compliance exercise.

Part 3 – Operational Manager: Standardisation and Competency

The Operational Manager focused on ensuring a standardised approach to service delivery.

This included checking staff competency and ensuring that staff are able to demonstrate that required procedures and expectations are understood and consistently applied in practice.

Competency monitoring provides additional assurance that training has translated into practice rather than relying solely on attendance at training.

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5. Improvement and Monitoring Plan

Improvement Area	Action Taken / Required	Responsibility	Evidence / Monitoring
Roles and responsibilities	Relevant staff retrained 19/08/2026	Training Manager	Training records
Service shortfalls	Findings reviewed and improvement expectations explained	Lucritia Jones – Registered Manager	Training/session records
Policy awareness	Relevant policies reinforced using supporting guidance	Lucritia Jones – Registered Manager	Guidance/training evidence
Standardised service	Consistent expectations reinforced across functions	Operational Manager	Operational monitoring
Staff competency	Competency checks following training	Operational Manager	Competency records
Communication of staff changes	Continue monitoring communication with Service Users/NOK	Care Coordinators	Telephone monitoring/feedback

Improvement Area	Action Taken / Required	Responsibility	Evidence / Monitoring
Continuity and staff briefing	Monitor rota arrangements, introductions and handovers	Care Coordinators	Rota/continuity monitoring
Staff involvement	Continue opportunities for staff feedback and involvement	Senior Management	Meetings, surveys and supervision
Overall effectiveness	Review progress and ensure improvements are implemented and sustained	Lucritia Jones & Golam Wayes	Management review and quality monitoring

6. Effectiveness Review

The three-part training represents the improvement action arising from the survey findings. **Lucritia Jones, Registered Manager, and Golam Wayes, Managing Director, will oversee the effectiveness review and have responsibility for ensuring that agreed improvements are implemented, monitored and sustained across Care Nexus.**

Effectiveness will be monitored through existing quality assurance arrangements, including:

- staff competency checks;
- supervision and appraisal;
- telephone monitoring and Service User feedback;
- complaints and compliments;
- audits and operational monitoring;
- care records and reporting;
- management meetings; and
- future annual Staff Survey results.

The effectiveness review will consider whether staff knowledge and operational practice have improved following the training and whether the lower-scoring themes identified through the survey demonstrate improvement through ongoing monitoring.

Where monitoring identifies that expected improvements have not been achieved or sustained, **Lucritia Jones and Golam Wayes will review the findings and determine**

further improvement actions, including targeted support, additional guidance, competency assessment or retraining where appropriate.

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7. Management Conclusion

The 2026 Staff Survey provides positive overall assurance, particularly in safeguarding, medication, staff competence, training, dignity and privacy.

Importantly, the survey has also provided Care Nexus with direct staff feedback identifying where further improvements could be made. The findings were reviewed and acted upon, with structured three-part training completed on **19 August 2026** for staff involved in customer services.

The findings and outcomes have been shared with all staff to support transparency, organisational learning and continued staff involvement in service improvement.

Lucritia Jones, Registered Manager, and Golam Wayes, Managing Director, will maintain management oversight of the improvement actions and review their effectiveness through Care Nexus's existing quality monitoring arrangements.

This demonstrates a clear quality improvement cycle:

Staff Survey → Findings Reviewed → Improvement Areas Identified → Findings Shared → Staff Retrained → Competency Checked → Effectiveness Reviewed → Further Improvements Implemented

The Staff Survey will be completed **annually** and will remain part of Care Nexus's ongoing quality monitoring and continuous improvement arrangements. Future survey results will also provide an opportunity to compare performance, identify emerging themes and assess whether improvements made following the 2026 survey have been sustained.