

# A24 Group Limited trading as Ambition 24 Hours. The Nursing Services of the UK. The British Nursing Association (BNA). Mayfair Specialist Nursing Nurse Agency

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**Type of inspection:**  
Unannounced

**Completed on:**  
11 December 2024

**Service provided by:**  
A24 Group Limited

**Service provider number:**  
SP2010010980

**Service no:**  
CS2010251496

## About the service

A24 Group Limited trading as Ambition 24 Hours, The Nursing Services of the UK, the British Nursing Association (BNA), Mayfair Specialist Nursing provides a nurse agency supplying registered nurses to individuals, organisations and other registered care providers throughout Scotland.

This service registered with the Care Inspectorate on 3 April 2011. A24 operate from premises in Sutton in Surrey. Their booking centre and quality directorate operate from South Africa. The manager of the service is a registered nurse. At the time of the inspection the service employed around 40 registered nurses working throughout Scotland.

## About the inspection

This was an unannounced virtual inspection which took place over three days between 27 November and 11 December 2024 between 09:30 and 15:30. The inspection was carried out by one inspector from the Care Inspectorate. As this was a virtual inspection information was shared using online discussions, emails and telephone calls.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with three clients of the agency.
- spoke with a number of nursing staff and the management team.
- sampled service documentation.

## Key messages

- Clients who used the service were very happy with the care and support provided in their services.
- Systems in place to ensure nurse competence were of a good standard.
- Nursing staff told us the service was well managed
- Some aspects of training and administration should be brought in line with Scottish practice.

## 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?	4 - Good
How good is our leadership and staffing?	4 - Good

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

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

4 - Good

We found strengths in aspects of the service provided and how these supported positive outcomes for people, therefore we evaluated this key question as good.

People's health and wellbeing benefitted from the care and support they received. We received positive feedback from clients who had utilised the service. It was evident from this feedback that nursing staff treated people with compassion, dignity and respect. One care home manager told us, 'they are approachable, kind and caused me no concerns', whilst another commented 'they did the job they were needed for'. This assured us that the quality of nurses provided was of a good standard and met the needs of the people they were caring for.

The service provided a good level of information. The company website was not only informative but had chat application facilities and contact details for the agency main offices. The website also had a link to the Care Inspectorate information page which allowed the public access to information held about the service and to current and previous inspection reports. This provided a good level of information so people could decide if the service was appropriate for them and gave assurances about its performance.

Information was sent out and feedback forms returned to ensure nurses' skill sets were right for the people supported. Profiles were sent to clients describing nurses qualifications, skill sets and experience which assisted them to select a nurse for their homes. The service handbook provided a good level of guidance that would ensure nurses practice and reporting was done in the best interests of the people they provided care and support to. Feedback forms were completed by clients after their engagement with nurses to feedback to the service of both positive and, if any, negative elements of nurses' performance. This gave assurances that nurse quality was assessed through issue and receipt of relevant information. This exchange was of a good standard and aided in meeting people's needs.

## How good is our leadership and staffing?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The service carried out regular compliance checks to ensure nurses were competent to be assigned to clients. The elements checked by the service included one that ensured nurses were all appropriately registered with their professional body. They checked to see if nurses had completed their listed mandatory training prior to being placed. Nurses were subject to annual appraisals to review their performance and identify any development needs. Feedback forms were completed by clients to identify positive and, if any, negative aspects of performance during and post assignment. This meant nurses were being continually assessed and their competence maintained to meet the needs of clients and the people supported.

Although the service does provide extensive Safeguarding training we saw no evidence it linked its training to Adult Support and Protection legislation that applies in Scotland. Safeguarding and Adult Support and Protection are very similar in themes and actions. However, it should be recognised that those nurses working in Scotland should receive formal training in the relevant legislation that applies to adult protection in Scotland. This should form an element of the compliance checks carried out prior to nurses being assigned to clients. To keep people safe it is important that care staff are aware of their duties under the

appropriate legislation in any part of the United Kingdom they may work in. This had been raised at a previous inspection of the service. (See repeated area for improvement 1).

On reviewing recruitment documentation, it was noted that disclosure records for each applicant had been stored for some considerable time. This was discussed with the management team and there were elements of service procedures that were not in line with best practice guidance. The relevant guidance links were shared with the provider so that any appropriate adjustments could be made. This had been raised in a previous inspection of the service. (See repeated area for improvement 2).

### Areas for improvement

1. Adult Support and Protection training needs to be revised and delivered in line with Scottish legislation to meet the needs of clients and staff.

The National Health and Social Care Standards, 3.20 and 3.21: I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities and respond to signs of deterioration in my health and wellbeing.

2. The manager should ensure Disclosure Scotland information is only stored for as long as it is necessary. The providers' policy about storage and destruction of records needs to reflect this.

The National Health and Social Care Standard, 4.11: I experience high quality care and support based on relevant evidence, guidance and best practice.

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

### Areas for improvement

#### Previous area for improvement 1

People who use the service should have access to up-to-date information to enable them to make informed choices and decisions.

The National Health and Social Care Standard, 4.27: I experience high quality of care and support because people have the necessary information and resources.

**This area for improvement was made on 26 April 2018.**

#### Action taken since then

The company website was not only informative but had chat application facilities and contact details for the agency main offices. The website also had a link to the Care Inspectorate information page which allows the public access to information held about the service and to current and previous inspection reports. This area for improvement had been met.

## Previous area for improvement 2

Adult Support and Protection training needs to be revised and delivered in line with Scottish legislation to meet the needs of clients and staff.

The National Health and Social Care Standards, 3.20 and 3.21: I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities and respond to signs of deterioration in my health and wellbeing.

**This area for improvement was made on 26 April 2018.**

### Action taken since then

Although the service does provide extensive Safeguarding training we saw no evidence of it linking its training to Adult Support and Protection legislation that applies in Scotland. This area for improvement has been repeated in this report.

## Previous area for improvement 3

The Registered Manager should develop a policy about managing stress and distressed reactions in line with good practice.

The National Health and Social Care Standard, 4.11: I experience high quality care and support based on relevant evidence, guidance and best practice.

**This area for improvement was made on 26 April 2018.**

### Action taken since then

The service policy on challenging behaviour was reviewed as part of the inspection. Reference is made to reducing stressed behaviours using techniques described as 'de-escalation strategies and personalised care plans.' It was noted that although the policy did include de-escalation advice and restraint guidance it could have provided further information about the management of stress and distress reactions. This enhancement of this policy with regard to stress and distress reactions was further discussed at feedback. This area for improvement had been met.

## Previous area for improvement 4

The manager should ensure Disclosure Scotland information is only stored for as long as it is necessary. The providers' policy about storage and destruction of records need to reflect this.

The National Health and Social Care Standard, 4.11: I experience high quality care and support based on relevant evidence, guidance and best practice.

**This area for improvement was made on 26 April 2018.**

### Action taken since then

On reviewing recruitment documentation, it was noted that disclosure records for each applicant had been stored for some considerable time. This was discussed with the management team and there were elements of procedure that were not in line with best practice guidance. The relevant guidance was shared with the provider. This area for improvement has been repeated in this report.

### Previous area for improvement 5

The complaint policy needs revised and updated to include information about the Care Inspectorate.

The National Health and Social Care Standard, 4.20: I know how, and can be helped, to make a complaint or raise a concern about my care and support.

**This area for improvement was made on 26 April 2018.**

#### Action taken since then

The service's complaints policy had been updated to include the contact details of the Care Inspectorate should people wish to escalate complaints. This area for improvement had been met.

### Previous area for improvement 6

All registered nurses should have access to regular supervision so that the quality of their performance can be demonstrated.

The National Health and Social Care Standard, 3.14: I have confidence in people because they are trained, competent, and skilled re able to reflect on their practice and follow their professional and organisational codes.

**This area for improvement was made on 26 April 2018.**

#### Action taken since then

Practice oversight should be exercised by the service utilising the nursing support the service provides. Feedback forms were provided to clients using the service so that any practice issues positive or negative could be reported. Nursing staff were also subject to annual appraisals from the agency leads. There was generally good communication between customers and consultants with regard to nurse performance. This ensured that good practice and development was recognised as part of agency performance. This area for improvement had been met.

### Previous area for improvement 7

The Registered Manager should ensure that quality assurance is carried out effectively and reflect service developments and continuous improvements. Stakeholders should be meaningfully involved in improving the service.

The National Health and Social Care Standard, 4.19: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

**This area for improvement was made on 26 April 2018.**

#### Action taken since then

Clients of the service we spoke to informed us that the service did ask for feedback on the performance of nurses provided. We also received positive feedback about the good quality of nurses the agency provided. We could see that before nurses received work elements of compliance were subject to ongoing checks such as training and professional registration. We sampled feedback forms as part of the inspection and found these to be useful in assessing nurse performance. This area for improvement had been met.

## 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?	4 - Good
1.2 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership and staffing?	4 - Good
2.3 Staff have the right skills and are confident and competent	4 - Good

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