Inquiry into regulation of care for older people

NHS Ayrshire & Arran Mental Health Services

Can we be confident that the regulatory system is picking up on care services where the quality of care is poor?

At present we can't be confident that the regulatory system is such that ALL services where quality of care is poor will be picked up. The new risk based system that SCSWIS are using, which appears to be the model most widely adopted now, where the frequency of inspection is reduced if services are graded at a certain level means that the regulatory bodies are reliant very heavily on information from members of the public and from whistleblowers within the service. I think this presents several problems. Some highly scoring services where the feedback from service users and residents has been positive have been found, upon inspection, to give inspectors serious concerns regarding the level of care provided. While these services would then be given more frequent inspections, under the new decreased frequency it may be a period of several years since the last inspection dependent on the type of service. We are reliant on service users and residents being well informed enough to know whether the care they get is of a sufficiently good standard.

Are there any particular weaknesses in the current system?

In the instance of SCSWIS the decreased frequency was decided and agreed on before they had decided on a robust tool to assess risk and as such the frequency with which a service should be inspected.

Does the system adequately take into account the views of service users?

The Care Commission and subsequently SCSWIS have had a major focus on participation and involving people who use services and their carers in assessing the quality of a service. I think their system is fairly robust in how it tries to do this.

Does the registration and regulatory system provide an appropriate basis for the regulation, inspection and enforcement of integrated social and NHS care in the community?

It is too fragmented at this stage. You may be left in situations where SCSWIS inspectors will be inspecting a service, but will be unable to inspect the staff within the service as they are NHS employees. With more and more integration it becomes a grey area as to who can inspect what and who has the authority to inspect different parts of different services. Clarity on this would be appreciated.

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