INTRODUCTION

Social care regulation aims to:

- monitor and enforce service standards;
- protect service users from abuse or neglect;
- promote quality of care; and
- provide information about the care sector.

The Burgner report (1996) recommended that regulation be financed mainly from providers’ fees, which should relate closely to the actual costs of regulation. Fee levels and resources set for the National Care Standards Commission (NCSC), which came into operation in April 2002, drew on studies of the costs of regulation conducted by the Personal Social Services Research Unit in 1998/99 (Netten et al., 1999; 2000). In 2003 the NCSC commissioned the PSSRU to undertake similar research into resource use under the new system.

The NCSC introduced a national system of regulation, using new minimum standards for service provision and national methodologies for registration and inspection by 71 area offices. Regulatory responsibilities included:

- Care homes and adult placement schemes
- Children’s homes

RESEARCH AIMS AND METHOD

The aims of the research were to:

- identify and investigate the resources used by the NCSC to undertake regulatory functions;
- compare these with the resource use by the previous registration and inspection units; and
- compare these resource requirements with the current arrangements for organisation and funding of the NCSC.

Frequency of inspections varied: care homes, adult placement services, and children’s homes twice yearly; residential family centers, independent fostering services, boarding schools, residential special schools and local authority fostering yearly.

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FINDINGS

Services regulated

21,825 care homes, 2,033 services for children (including 1,182 children’s homes), and 927 independent healthcare establishments were registered with the NCSC at 31 March 2003.
Activities undertaken

Central data indicated that the NCSC conducted 38,280 inspections of adult services and 3,154 of children’s services. This compares with 41,540 adult services and 3,050 children’s homes and boarding schools inspected by local authority and joint R&I units in 2000-01 (Department of Health, 2001).

The NCSC investigated just over two thirds of the 8,848 complaints about services received compared with investigation of just over a quarter of the 13,900 complaints received by R&I units in 2000-01.

Responding areas reported receiving nearly 5,000 new registration applications for care homes and 1,066 applications for children’s services. 716 care homes and 308 children’s services were registered. On average each responding area registered 13 care homes and six children’s homes.

Area offices made 745 major variations to conditions of registration for care homes and 87 major variations to children’s services. 426 care home re-registrations were made due to a change in owner and 31 children’s services were re-registered.

Central data indicated that 2,389 care homes closed. Four of these were due to enforcement action. Sixty children’s homes closed.

Staffing

Nearly two-thirds of NCSC staff were inspectors. Just over a quarter of the staff were business services staff and one-eighth management. There was some regional variation. At the end of the first year about 5 per cent of inspector and manager posts were vacant and 8 per cent of business services staff posts.

The majority of responding inspectors had worked in regulation for more than five years. The average hours inspectors worked per week was similar to that in the past, although hours worked varied widely. Nearly half of the business services staff said the training on internal systems was less than adequate.

Time use

Overall patterns of activity suggest a reduction in specialisation. More inspectors who had responsibility for children’s services also had responsibility for adult services than in the past.

A smaller proportion of inspectors’ overall time was spent on regulating children’s services: 24 per cent of the sample week compared with 39 per cent among inspectors responsible for children’s services in 1999.

Inspectors reported spending a higher proportion of time on inspection during the sample week than in the past. Among inspectors with responsibility for adult services the proportion of time spent on inspection rose by 15 per cent, from 43 per cent in 1998 to 58 per cent in 2003.

Less time than in the past was spent on management and administration, enforcement activities, and development activities not directly related to registration, inspection, complaints or enforcement.

Business services administrators and senior administrators reported spending half their time on registration and inspection or inspection-related activities.

Resources used by activities

Figure 1 compares the resources used to conduct registration activities in 2003 with those used in 1998/9. Fewer inspector hours were spent on new registrations and variations than in the past, although the overall time spent on registration changed little. Business services staff spent between three and eight hours on average on registration activities per week. The variation in time taken was less than in the past.

Figure 2 compares the resources used to conduct inspection activities in 2003 with the resources used in 1998/9.

More inspector hours were spent on inspections of care homes, children’s homes and boarding schools than in the past.

Allowing for the balance of announced and unannounced inspections, the average time taken to inspect a care home had increased by 55 per cent, or by 71 per cent when the input of business services staff is included. The time taken to conduct announced inspections of care homes increased by more than double that of unannounced.

Similarly, the average time to inspect a children’s home had increased since 1999 by 44 per cent, or by 56 per cent when the
The PERSONAL SOCIAL SERVICES RESEARCH UNIT undertakes social and health care research, supported mainly by the Department of Health, and focusing particularly on policy research and analysis of equity and efficiency in community care, long-term care and related areas—including services for elderly people, people with mental health problems and children in care. Views expressed in PSSRU publications do not necessarily reflect those of funding organisations. The PSSRU was established at the University of Kent at Canterbury in 1974, and from 1996 it has operated from three branches:

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