

Meeting of South Ayrshire Health and Social Care Partnership	Performance & Audit Committee
Held on:	31st March 2026
Agenda Item:	11
Title:	Adult Services Care Inspection update
Summary:	
<p>The purpose of this report is to give an update to Performance and Audit Committee members on recent inspection activity that has taken place across commissioned and in house services in South Ayrshire.</p>	
Author:	Stewart Marshall, Head of Community Health and Care
Recommendations:	
<p>It is recommended that the Performance and Audit Committee</p> <p>i. Notes the inspection report and collaborative work taking place between the Health and Social Care Partnership (HSCP) and Care Providers.</p>	
Route to meeting:	
<p>Inspection report submitted to the Performance and Audit Committee on an annual basis.</p>	
Implications:	
Financial	<input type="checkbox"/>
HR	<input type="checkbox"/>
Legal	<input type="checkbox"/>
Equalities	<input type="checkbox"/>
Sustainability	<input type="checkbox"/>
Policy	<input type="checkbox"/>
ICT	<input type="checkbox"/>

ADULT SERVICES CARE INSPECTION UPDATE

1. PURPOSE OF REPORT

- 1.1 The purpose of this report is to provide an update to the Performance and Audit Committee on inspection activity across external and internal services regulated by the Care Inspection.

2. RECOMMENDATION

2.1 It is recommended that the Performance and Audit Committee

- i. Notes the inspection work and performance to date.**

3. BACKGROUND INFORMATION

- 3.1 The Care Inspectorate is a scrutiny body which supports improvement. They look at the quality-of-care provision to ensure it meets the Health and Care Standards, and the quality-of-care people should expect.
- 3.2 All care services in Scotland must be registered with the Care Inspectorate.
- 3.3 The Care Inspectorate carry out inspections of care services, and look at key areas like care and support, physical environment, quality of staffing, and quality of management and leadership.
- 3.4 Care provision is assessed on a scale from 1 to 6, where 1 is unsatisfactory and 6 is excellent.
- 3.5 Where they find that improvement is needed, they work with the care provider, Health and Social Care Partnerships and wider Community Planning Partnerships to support the provider to make positive changes.
- 3.6 After every inspection, the Care Inspectorate publish an inspection report showing findings:
- 3.7 For noting, the Care Inspectorate may not inspect services every year, may inspect services more than once per year and may inspect several or all Key Questions during an inspection.
- 3.8 In addition, the HSCP Commissioning Team carry out annual quality assurance visits for commissioned services to ensure services continue to provide care in line with the Health and Care Standards and contract specifications.
- 3.9 These visits are designed to be supportive and collaborative, with a focus on what is working well, learning and continuous improvement.
- 3.10 As part of annual reviews of My Life My Outcome Plans, individuals also receive an annual review of their personal plans by social care staff to ensure care

provision continues to meet the individual's outcomes and care needs, and in line with standards.

4. REPORT

Assurance and Collaboration

- 4.1 The Community Services Collaborative Group (CSCG) is a multi-disciplinary, multi-agency team including key clinical, professional and operational leads and partners (inclusive of Scottish Care and Care Inspectorate) and covers the care provision and support of adults and older adults in our community settings.
- 4.2 The group meets fortnightly to discuss and highlight where there may be pressures with care provision across South Ayrshire and agree the implementation of solutions to address these pressures, with a particular focus on strength based, partnership working to mitigate risk and drive quality improvement.
- 4.3 This approach allows a pro-active, coordinated response to supporting care providers where there may be challenges in meeting standards of care.
- 4.4 To support this approach, there is a supplementary care home multi-disciplinary meeting that takes place alternate weeks wherein locality health and social care teams, the care home professional support team, infection prevention and control and other operational teams monitor and triangulate data and intelligence around care home providers, take remedial action where required, and inform discussion and decision making at the CSCG group.
- 4.5 In addition, there are regular Care Home and Care at Home Provider Forums led by the Commissioning Leads aimed at bringing providers together for peer support, shared learning and improvement, and where there may be particular wider issues impacting care provision an opportunity to highlight these and for them to be recognised.

Recent inspections

- 4.6 Below is care inspectorate activity and mode grades of recent inspections for commissioned services.
- 4.7 Care Inspectorate Activity
- 4.8 The mode grades across **all Portfolios** between Oct – Dec 2025 are as follows with grade 5 = Very Good, grade 4 = Good, grade 3 = Adequate:
 - KQ1 How well do we support peoples/children wellbeing? - 5
 - KQ2 How good is our leadership? - 4
 - KQ3 How good is our staff team? - 5
 - KQ4 How good is our setting? - 4
 - KQ5 How well is care and support planned? - 4

4.9 The mode grades across **Adult Services** between Oct – Dec 2025 are as follows:

- KQ1 How well do we support peoples/children wellbeing? - there were equal mode grades of 5,4 and 3 awarded during the reporting period.
- KQ2 How good is our leadership? - 4
- KQ3 How good is our staff team? - 4
- KQ4 How good is our setting? - 4
- KQ5 How well is care and support planned? - 4

4.10 The mode grades across **Care at Home Services** between Oct – Dec 2025 are as follows:

- KQ1 How well do we support peoples/children wellbeing? - 5.
- KQ2 How good is our leadership? - 4
- KQ3 How good is our staff team? - 5
- KQ4 How good is our setting? - N/A
- KQ5 How well is care and support planned? - 4

4.11 The mode grades across **Care Home Services** between Oct – Dec 2025 are as follows:

- KQ1 How well do we support peoples/children wellbeing? - 5
- KQ2 How good is our leadership? - 5
- KQ3 How good is our staff team? - 5
- KQ4 How good is our setting? - 4
- KQ5 How well is care and support planned? - 4

4.12 The mode grades across **Children, Families and Justice Services** between Oct – Dec 2025 are as follows:

- KQ1 How well do we support peoples/children wellbeing? - 3
- KQ2 How good is our leadership? - 4
- KQ3 How good is our staff team? - 4
- KQ4 How good is our setting? - 4
- KQ5 How well is care and support planned? - 4

4.13 This accounts for 13 inspections across our service area.

4.14 Data for the last 12 months shows an improved trajectory across all key questions for commissioned services and provides assurance that SAHSCP Option 3 commissioned services are either sustaining their performance or are on an improvement trajectory from year 2023 for all Key Questions.

Moratoriums

4.15 There have been two moratoriums for care at home providers over the past 12 months following poor inspections and necessary improvements.

- 4.16 One provider moved from an Enforced to Restricted Moratorium on 16th October 2025 with the Restricted Moratorium ending on 20th November 2025 following an improvement plan and improved inspection grades.
- 4.17 The second provider entered a Voluntary Moratorium on 1st December 2025 which moved to an Enforced Moratorium on 10th February 2026 and remains in place. The HSCP continues to support the provider with their improvement work.
- 4.18 The HSCP are committed to working alongside providers to ensure support and care is in line with national care standards and progress on any improvement work is monitored via the CSCG.

Public Protection

- 4.19 Recognising the inherent vulnerabilities in an older population in receipt of care services, the Adult Protection Committee and members within same have worked closely with providers to ensure clear guidance in relation to adult protection and adults with concern.
- 4.20 This work has included development of a guidance and matrix that supports Care Home Providers with establishing when there may be risk, reporting mechanisms and supportive arrangements.
- 4.21 It is anticipated that similar work will take place with Care at Home Providers.

In-house Services

- 4.22 The table below provides the recent in-house inspections.

Service Name	Date of Inspection	How well do we support people's wellbeing	How Good is our Leadership	How good is our staff team	How good is our setting	How well is care and support planned
Chalmers Road	18/02/2026	5 - Very Good	N/A	N/A	5 - Very Good	N/A
Hillcrest	26/05/2025	5 - Very Good	N/A	4 - Good	4 - Good	N/A
South Lodge	06/11/2025	5 - Very Good	N/A	5 - Very Good	5 - Very Good	N/A

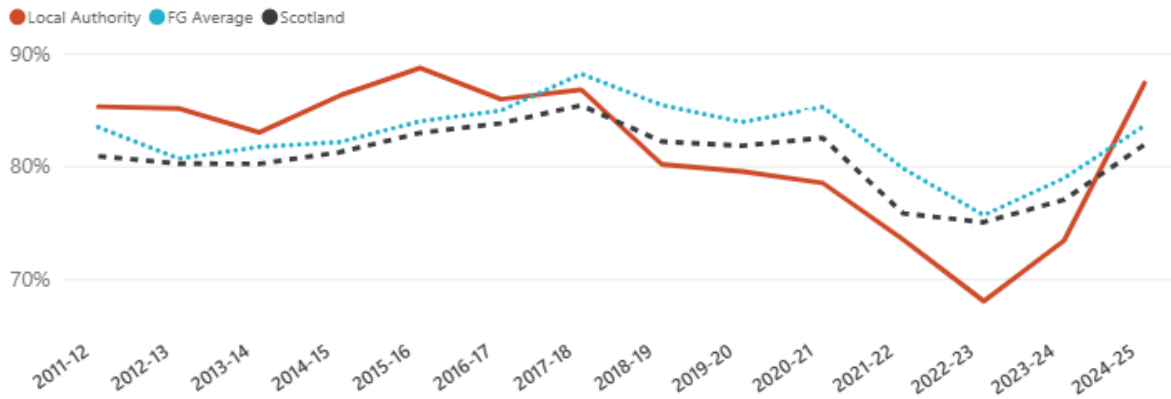
South Ayrshire Care at Home	13/10/2023	5 - Very Good	5- Very Good	5- Very Good	N/A	5 - Very Good
Arran View	09/06/2023	4- Good	5 - Very Good	N/A	N/A	N/A
Nursery Court	03/03/2023	5 - Very Good	5 - Very Good	N/A	N/A	N/A
SA Integrated Reablement Service	04/09/2025	5 - Very Good	N/A	5 - Very Good	N/A	N/A

- 4.23 There has been a recent positive inspection for South Ayrshire Care at Home services however the final report has still to be finalised for publication.
- 4.24 There are no requirements for any of the in-house services and the services continue to demonstrate they are delivering support and care in line with the recognised standards.
- 4.25 The HSCP are very proud of the services provided, and the grades reflect the passion and dedication of the workforce to deliver care that matters.
- 4.26 In addition, the grades remain at a good/very good level in the midst of service transformation, an example of this at South Lodge with work ongoing to increase Reablement care capacity.

Benchmarking

- 4.27 The Improvement Service publishes annual benchmarking data which includes a measure “Proportion of Adult Care Services Graded as good or better”. The latest data for the full year of 2024-25 shows a marked improvement in performance in South Ayrshire with the proportion of services being graded as good or better rising from 73.4% in 2023/24 to 87.4% in 2024/25. This is higher than both the Family Group average of 83.6% and the National average of 81.9%.

SW07 - Proportion of adult care services graded good or better



SW07 - Proportion of adult care services graded good or better

	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25
Local Authority	85.3%	85.1%	83.0%	86.3%	88.7%	85.9%	86.8%	80.1%	79.5%	78.5%	73.5%	68.0%	73.4%	87.4%
FG Average	83.4%	80.7%	81.7%	82.1%	84.0%	84.9%	88.2%	85.4%	83.9%	85.2%	79.8%	75.6%	78.9%	83.6%
Scotland	80.9%	80.2%	80.2%	81.2%	82.9%	83.8%	85.4%	82.2%	81.8%	82.5%	75.8%	75.0%	77.0%	81.9%

% Change

	Since base year	Since previous year
Local Authority	2.1%	14.0%
FG Average	0.2%	4.7%
Scotland	1.0%	4.9%

Moving forward

- 4.28 The SAHSCP is committed to working closely with care providers, recognising the number of citizens in receipt of care across the Care at Home and Care Home sector, and cognisant of national and local challenges within the care sector specifically in relation to staffing.
- 4.29 To support continuous improvement and quality assurance there is work ongoing to triangulate annual reviews facilitated by the Care Home Review Team, and the Quality Assurance Visits delivered by the Commissioning Team, ideally at the same time thus adopting a seamless and collaborative approach.

5. STRATEGIC CONTEXT

5.1 The report links the performance measures to the IJB Strategic Plan Strategic objectives:

1. We focus on prevention and tackling inequality.
2. We nurture and are part of communities that care for each other.
3. We work together to give you the right care in the right place.
4. We help to build communities where people are safe.
5. We are an ambitious and effective Partnership.
6. We are transparent and listen to you.
7. We make a positive impact beyond the services we deliver.

5.2 The report is specific linked to objective number 5; we are an ambitious and effective partnership in that we *continue to develop our quality assurance approach in commissioned services, supporting 'provider' partners to provide*

high quality and safe services, encouraging a culture of self-evaluation and applying rigour to public protection in collaboration with Regulators and through good clinical and care governance.

6. IMPLICATIONS

6.1 Financial Implications

6.1.1 There are no specific financial implications arising directly from the consideration of this report.

6.2 Human Resource Implications

6.2.1 There are no specific human resource implications arising directly from the consideration of this report.

6.3 Legal Implications

6.3.1 There are no specific legal implications arising directly from the consideration of this report.

6.4 Equalities implications

6.4.1 There are no specific equality implications arising directly from the consideration of this report.

6.5 Sustainability implications

6.5.1 There are no sustainability implications arising directly from the consideration of this report.

6.6 Clinical/professional assessment

6.6.1 Clinical and professional assessment and advice is pivotal to all the work taking place with Providers, and this takes place on a regular basis and inclusive within the Community Services Collaborative Group

7. CONSULTATION AND PARTNERSHIP WORKING

7.1 This report has been prepared in consultation with relevant officers.

8. RISK ASSESSMENT

8.1 There are no immediate risks associated with the approval of this report.

REPORT AUTHOR AND PERSON TO CONTACT

Name: Stewart Marshall, Head of Community Health and Care

Phone number: 01292 612465.

Email address: marshallst@aapct.scot.nhs.uk

16/03/2026