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Silent Witness

Vulnerable residents of care homes are being betrayed by the official watchdog



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Care of the vulnerable is one of the most important measures of a civilised society. A report in The Times today suggests that this duty is being gravely ignored and that the body set up to monitor standards, the Care Quality Commission (CQC), is neither effective nor very caring.

In residential homes, owned by a private company, that catered for young adults our reporter found that one deputy manager was a convicted sex offender working illegally in Britain. The company's recruitment records showed that it had not obtained references from employees and had conducted only incomplete checks on their criminal records and entitlement to work.

And in one particularly egregious case, an autistic resident was allegedly assaulted in his room by a fellow resident, a high-risk sex offender. Potential DNA evidence was destroyed by the Enfield care home and staff there were initially told not to contact the police. Police were informed only two days later, and not by a member of the management. The incident occurred in November 2015 but the CQC, which has a commitment to transparency, joined in the general official silence about the incident. By October last year it had rated the home as inadequate and unsafe but only because of loose drawer handles, overflowing bins and a broken dishwasher. These were enough to have the home closed down. There was no

mention, however, of the fact that a sex offender, since convicted for a separate assault, had unsupervised access to the bedroom of a defenceless resident.

The mother of the alleged victim said that she had trusted the experts, police and the CQC to do their job and investigate her son's case. Instead, officialdom fell silent. Police felt that they did not have sufficient forensic evidence and management was more concerned with shielding itself against reputational damage.

This should have been the moment for the CQC to bare its teeth. It plainly failed. People referred to a care home, and their families, are entitled to know that residents are not at risk of being assaulted, abused or suffering through neglect.

To build the necessary public trust, the CQC has to honour its brief as an independent regulator of health and care in England. Its stated mission is to protect people from harm and hold care providers to account and it has been given the tools to do so. Since critical shortcomings were exposed in the Mid Staffordshire NHS Foundation Trust, the CQC has acquired the power to bring criminal charges against an offending company or its senior management. Rather than deploy this weapon, it appears to feel more comfortable with grading homes, warning those who fall short and closing down the bad eggs. Yet its own reporting suggests that this barely scrapes the surface. A CQC inspection arouses no great fear among care home managers. Staff shortages and a lack of legal expertise have hampered its monitoring activity.

If a regulatory agency chooses not to flex its muscles in exemplary cases, its authority ebbs away. In the past two years, in which 16,000 homes have been inspected, only six prosecutions have been brought, relating mainly to physical injury caused by falls and accidents. The Enfield case gave it an opportunity to challenge in court a fundamental weakness in the care system: the co-habitation of sex offenders with vulnerable adults. It ducked that challenge and in so doing betrayed its mission.