



Guidance on Peripatetic Management Arrangements

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Content and purpose

For all registered care services there is a requirement to have a manager that is the person who oversees that service on a day-to-day basis. The Care Inspectorate supports the delivery of new and innovative models of delivery of care. It is acknowledged that it is not always possible or necessary to have a full-time manager for each service and that depending on the size and quality of the setting a manager may have responsibility for more than one registered provision. In acknowledgement of this the Peripatetic Management Arrangement guidance has been developed to support services to provide appropriate management arrangement that meets the needs of people who use the service.

This guidance sets out what a peripatetic management arrangement could be, the process for this arrangement to be considered, and the criteria taken into account. The Care Inspectorate recognises the different ways care services are being delivered, and want to balance the need for efficiency and innovative practice with the positive impact that high quality management and leadership can have on outcomes for people using care services. Arrangements will be considered on an individual basis. The Care Inspectorate will only approve such arrangements where we assess the risks of implementation are low. In making this assessment we will take into account a range of factors including evidence from the provider about how:

- they will meet the criteria set out in this policy
- they will ensure compliance with regulations and take account of the Health and Social Care Standards
- the management arrangements will support positive outcomes for people using the care services.

What is a peripatetic management arrangement?

Peripatetic management describes the situation where one individual is the named manager of more than one registered care service; this includes combined services. The individual can be employed by the same or different providers. In this arrangement, each service is separately registered. It may be that each service is distinct, inspected individually, with a report produced for each service, or it may be that they are combined. A peripatetic manager will move between services. The Care Inspectorate will not be prescriptive in how this operates providing the outcomes for people remain positive and each service has regular, effective support and leadership from the manager.

Process

Where a provider/s wish to consider peripatetic management arrangements they are required to notify the Care Inspectorate through the [digital portal](#) and complete the change of manager form(s), indicating which services the arrangements will apply to. The provider/s must also complete and submit an application to vary/add a condition through the [digital portal](#) for each service the arrangement relates to. The provider must describe on the application how their approach will be consistent with this policy and support good outcomes for people using the services and a positive regulatory history. The Care Inspectorate will take into account and consider the identified criteria and the evidence submitted by the provider/s. Where arrangements

described are unclear, or there is potential for improvement, the allocated inspector will discuss this with the provider/s.

Where an assessment has been made to grant the application to add or vary a condition, this will be added to the registration certificate for each service to ensure the public are aware the arrangement is in place. The name of the manager will not be detailed in the condition, therefore, if the manager changes, the peripatetic management arrangement will remain in place. If a provider proposes to no longer have a peripatetic management arrangement, they must apply to remove the condition for each service.

Following the assessment, as with all applications, the Care Inspectorate may recommend the application is granted or refused. Where the Care Inspectorate has evidence through our scrutiny activity that the outcomes for people using the care services have deteriorated or the services are no longer of a high quality, we may consider what action should be taken. This may include sharing our concerns with the provider/s and agreeing a management improvement plan, making requirements with agreed timescales, or taking enforcement action.

Criteria

When assessing the request for a peripatetic arrangement we will take into account the care service's regulatory history including complaint and enforcement activity. Where a provider makes a request to the Care Inspectorate to consider a peripatetic management arrangement the following will be considered:

- The provider must demonstrate how the arrangement will provide positive outcomes for people who use the services.
- The regulatory history of the services must demonstrate positive outcomes for people who use them.
- The Care Inspectorate risk assessment for all of the services, ensuring it is low or medium for the services that the arrangement will apply.
- The provider must ensure the manager has the required qualifications, skills, knowledge and experience to manage the services and is appropriately registered with or can fulfil the legal responsibility to register with the relevant regulatory body.
- The provider must ensure the manager is supernumerary at all times.
- The manager has a clear understanding that they are responsible and accountable for the day to day management and operations of each service.
- The provider has a clear management structure in place detailing who is responsible when the manager is not present.
- Where the manager is the lead/responsible person in relation to adult/child protection, there is a clear procedure detailing who the responsibility is delegated to when the manager is not in the service. The provider must ensure that people using the care services, relatives and staff are aware of the peripatetic arrangements and are aware of who they should contact when the manager is not present in the service. The provider must ensure suitable contingency arrangements are in place to deal effectively with emergencies.
- Where staff regularly deputise for the manager, there must be evidence that the staff member is appropriately registered with the relevant regulatory body. This may mean that they require to be registered on both parts of the register.
- The provider can demonstrate how the management arrangements will ensure continued improvement to the services. The provider has a clear procedure to evaluate how effective the arrangement is and how the impact on outcomes for people who use the services will be measured.

- The provider must ensure the manager will have sufficient time allocated to each service. This should be no less than one day or one session per week for services that do not operate 24 hours. For 24 hour services this will be agreed on an individual basis.
- The size of the different services, their complexity and their geographical spread must be such that one individual can reasonably manage each service.

It is important to ensure that this policy is read in conjunction with the Care Inspectorate's policy on assessing the ability of a manager in terms of their skills, knowledge and experience to manage a care service.

Conditions of registration

Some services may have a peripatetic management arrangement, where one manager is also the manager of (an)other registered service(s); this includes combined services. In these circumstances a condition should be placed on all of the certificates where the peripatetic management arrangements have been agreed e.g.

The manager (*no need to state the name*) is also the manager of *Insert other service name and CS number*.

*For newly registered services only, this condition should read:

The manager (*no need to state the name*) is also the manager of *Insert other service name and address*.

This means if the manager changes and the peripatetic management arrangements remain in place then the condition would not need to be changed.

Legislation, Health and Social Care Standards and Codes of Practice

When developing and reviewing this policy we have considered and taken account of the following:

The Public Services Reform (Scotland) Act 2010 (The Act).

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 in particular:

- SSI 2011/210 regulation 3 Principles
- SSI 2011/210 regulation 4 Welfare of users
- SSI 2011/210 regulation 7 Fitness of managers
- SSI 2011/210 regulation 9 Fitness of employees
- SSi 2011/210 regulation 17 Appointment of manager

Health and Social Care Standards – My support, my life

- 1: I experience high quality care and support that is right for me
- 2: I am fully involved in all decisions about my care and support
3. I have confidence in the people who support and care for me
- 4: I have confidence in the organisation providing my care and support
- 5: I experience a high quality environment if the organisation provides the premises.

The Scottish Regulators' Strategic Code of Practice

SSSC Codes of Practice for Social Service Workers and Employers

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