



Emerging Hybridity

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Emerging hybridity

A comparative analysis of regulatory arrangements in the four countries of the United Kingdom

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Introduction

Healthcare regulation is a policy used to tackle quality challenges through compliance, deterrent and improvement approaches. The four countries of the United Kingdom (UK) provide a natural experiment offering an opportunity for comparison. The aim of this study is to understand emerging regulatory models and their associated tensions.

Methods

This study focuses on six UK organisational regulatory and improvement agencies. Hospital-based care is the main area of focus for this study, it accounts for the majority of healthcare expenditure in the UK and all six organisations review this area making it suitable for comparison. The study uses thematic analysis to compare the current regulatory architecture, models and aims. Documents including board papers, inspection guidelines and policies that include information related to agency purpose, strategy, and results are analysed. Forty-eight participants from the agencies, with a mixture of clinical and non-clinical backgrounds and a cross-section of roles, including board-level executive and inspectors were interviewed.

Results

The study describes how regulatory and improvement agencies have different organisational remits, scope, approaches and methods of delivering their missions. The findings detail that effective regulatory oversight relates to the ability of regulatory and improvement agencies to balance their aims of improvement, accountability and assurance. The analysis illustrates that compliance activities dominate agency work and highlights how hybrid regulatory models are emerging, using improvement support, in parallel with deterrent and persuasive enforcement tactics.

This research finds that hybrid regulatory models face three main areas of challenge: roles, resources and relationships.



“[I wonder] how knowledgeable the inspectors are around improvement methodology because you can’t judge it unless you know what you’re looking for.”

— Interviewee

Roles

Hybrid models create tensions on regulatory roles. To manage these, the relationship between detection and enforcement methods, particularly for improvement support, needs further clarification.

Resources

Different resources are required in hybrid regulatory models. Agencies face challenges to recruit staff and need to be more explicit in their choices of improvement support to ensure they recruit relevant skills for the particular methodology chosen. However, agencies face challenges to recruit such people.

Relationship

High levels of intervention and support could strain relationships with regulated organisations putting the trustworthiness of the agencies as independent assessors at risk, and blur roles and accountabilities. Moreover, when the main motivation for improvement in organisations is externally-led through regulatory and improvement agencies, organisations exert less internal improvement effort. This could inhibit healthcare

“[NHS organisations] are saying actually don’t confuse us. You can’t come in with an inspection hat on and then an improvement one.”

— Interviewee



organisations from investing and developing long-term improvement capability, leading to a dependence on external improvement support from agencies, increasing their resource requirements.

Conclusions

Effective healthcare regulation requires greater alignment of regulatory aims of improvement, accountability and assurance. Hybrid regulatory models are emerging within UK regulatory and improvement agencies. These use direct improvement support with organisations to supplement other persuasive and punitive methods. This study identifies that the execution of hybrid models is complex and emergent. The research highlights three key areas of challenge linked to roles, resources and relationships when developing hybrid models. This study contributes to patient care and research by furthering the understanding and emergence of hybrid regulatory models and associated tensions.

Declaration of competing interests

This research is funded through a PhD Award from the Health Foundation.