

Progress Report – Intelligence and Risk Action Plan

Report to: Board

Date: 21 March 2013

Report by: Annette Bruton (Chief Executive)

Karen Anderson (Director of Strategic Development)

Christina Naismith (Project Manager – Risk) Ingrid Gilray (Project Manager – Intelligence)

Report No: B-03-2013

Agenda Item: 6.3

PURPOSE OF REPORT:

To inform the committee of progress up to 31 December 2012 in respect of the 14 key deliverables in the Intelligence and Risk action plan.

RECOMMENDATIONS

That the Board:

- 1. Notes progress on the fourteen key deliverables now combined to create twelve, as described.
- 2. Notes that work is underway to identify potential key deliverables for 2013/14.

Report Number B-03-2013

Version Control and Consultation Recording Form

Version	Consultation		Manager	Brief Description of Changes			nges	Date	
	Senior Management		ET	No	No changes				14/2/13
	Legal Services								
	Resources Di	rectorate							
	Committee Consultation (where appro	S&P Committee	No	o changes				5/3/13	
	Partnership F Consultation (where appro								
Equality Impact Assessment									
To be completed when submitting a new or updated policy (guidance, practice or procedure) for approval.									
Policy Title:									
Date of Initial Assessment:									
EIA Carried Out					YES			NO	х
If yes, please attach the accompanying EIA and briefly outline the equality and diversity implications of this policy.									
If no, you are confirming that this policy will have					Name: Christina Naismith				
no negative impact on people with a protected characteristic and a full Equality Impact Assessment is not required.					Position: Project Manager - Risk				
Authorise	ised by Director Name: Karen			n	Date: 5	5 Feb	ruary 2013		

Version: 5.0 Status: Final Date: 14/03/2013

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1.0 BACKGROUND

An Intelligence and Risk Improvement Plan for the Care Inspectorate covers three years, from 2012/13 to 2014/15. Priorities for year 1 were pulled out separately into a 'key deliverables 2012/13' action plan. This sets out what the product is and provides a brief description of each key deliverable ie what the activity/output will comprise as well as the outcomes (benefits) that each work stream will achieve, a lead officer, timescales and resources. Both the improvement plan and the action plan were approved by the Board on 14 June 2012. Work programmes appropriate to the scale of the task are in place for all the key deliverables.

This is the second dashboard report to be considered by the Executive team for onward submission to the Strategy and Performance Committee. It sets out progress against the intended outcomes in the action plan.

An Intelligence and Risk group oversees the implementation of the action plan and deliverables.

2.0 SIGNIFICANT ISSUES

Substantial progress has been made in the respect of the majority of key deliverables. We anticipate that by March 2013 that all but one of these will have been fully delivered, with some having implications for follow on work. For example, there will be a need for a substantial all staff training programme to support the implementation of revised Care Inspectorate child and adult protection procedures.

Following our first dashboard report, we agreed to combine key deliverables 1 and 2 as these were so interdependent. The first of these concerned the development of new Key Performance Indicators (KPIs) and the second concerned communication to all staff about the new KPIs. We have also combined key deliverables 3 and 9 as these are also interdependent and require to be considered together. Key deliverable 3 was about improving pre-inspection information and key deliverable 9 was about better use of information from notifications. This has developed into a large -scale piece of work involving all information received from providers via annual returns, notifications and self-evaluations. Focused work is needed to rationalise these information sources and to ensure that we fully utilise the information received. This will be incorporated into the work programme for 2013/14. Work has commenced on identifying key deliverables for 2013/14 and this is the subject of a separate report for consideration by the Strategy and Performance Committee.

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3.0 RESOURCE IMPLICATIONS

The majority of the work is best developed in-house by staff who have the best knowledge of the issues although where required we have secured additional external expertise. All of the tasks have been allocated to a lead officer who has the necessary expertise.

In the main resources are available from within existing budgets, and are being taken account of in budget plans for 2012/13. Where additional resources have been identified a business case has been developed and submitted to the Executive Team. There may be, as yet, unquantified resource implications arising from the full implementation of the strategic intelligence framework and risk framework in 2013 and going through to 2015.

The cost to the organisation of not developing its intelligence infrastructure to develop a more qualitative, informed and risk based approach is significant not least in the potential risks posed to people using services and carers and the increasing challenges for staff in handling increasing and potentially more complex information.

4.0 BENEFITS FOR PEOPLE WHO USE SERVICES AND THEIR CARERS

This work will ensure that the Care Inspectorate becomes a more responsive organisation using its intelligence better to inform its strategic, inspection planning and operational activity. It will also improve its ability to assess risk, and listen, and act on the views of people who use services and their carers. It will enable the organisation to become more targeted and proportionate, as well risk based in its approach to scrutiny. This in turn will provide stronger assurance and protection for people who use service and their relatives and carers

5.0 CONCLUSION

Significant work is underway in respect of all 12 key deliverables (previously 14). The majority are on schedule to deliver. Overall status, as at 31 December 2012, is approximately 75% complete, 25% to be completed, which is as planned.

LIST OF APPENDICES

Appendix 1 - Programme Dashboard

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