

## **Care Inspectorate Quality Improvement Strategy**

### **1. Introduction**

We aim to ensure that all of our scrutiny and improvement is rigorous and focuses on supporting and enabling the design, delivery and commissioning of safe, high quality and compassionate care for people across Scotland.

To do this we must maintain and strengthen our focus on quality in the face of financial pressures and organisational challenges. We must respond to the call from people who use care services and their families and carers, providers, commissioners, other scrutiny bodies, policy makers and the public to make sure that we provide protection and assurance on the quality of care while supporting improvement and acting as a catalyst for innovation. We must also take note of the recommendations to support public sector reform in the Crerar and Christie reports as well as taking cognisance of the salutary lessons from reports such as Francis, Keogh and Berwick.

We will achieve this by continuing to listen to and act upon the concerns of people who use services, their families and carers and our staff to ensure we put people at the heart of all we do. We will work in partnership with people who use services and their carers, providers, commissioners, other scrutiny partners and umbrella bodies and groups to actively engage on how we continuously improve our work and therefore evidence our learning and performance.

### **2. Our vision**

The Care Inspectorate believes that every person in Scotland should receive high quality, safe and compassionate care that reflects their rights, choices and individual needs throughout their whole care experience.

### **3. Our purpose**

The Care Inspectorate will contribute to this vision by:

- providing assurance and protection for people who use services and their carers
- delivering efficient and effective regulation and inspection that meaningfully involves people who use services and their carers
- supporting improvement and signposting good practice
- acting as a catalyst for change and innovation
- working in partnership with people who use services and their carers, scrutiny, delivery and policy partners.

### **4. Our values**

- Person-centred – we will put people at the heart of everything we do.
- Fairness – we will act fairly, be transparent and treat people equally.
- Respect – we will be respectful in all that we do.
- Integrity - we will be impartial and act to improve care for the people of Scotland.
- Efficiency – we will provide the best possible quality and public value from our work.

## 5. Organisational culture

An organisation's culture is derived from the behaviours and attitudes of the workforce and leaders in the organisation. Key to the success of quality improvement is developing an organisational culture that fosters a learning culture, puts continuous improvement at the core of its business and encourages new thinking and innovation to support delivery of strategic objectives.

A consistent theme within the Care Inspectorate is the motivation of staff to go the extra mile and do their very best for people who use services and their carers. This commitment is reflected in our organisational values which set the foundation for delivery of our Corporate Plan strategic objectives. We will continue through our organisational development plan to build the capacity, capability and confidence of our workforce to ensure all staff have the right skills to perform well and deliver high quality in their respective roles.

### **The Care Inspectorate employee is:**

- person centred at all times
- team and colleague focused
- focused on continuous improvement
- flexible and adaptable
- friendly and compassionate
- honest and respectful
- engaged and enthusiastic.

### **The Care Inspectorate manager is:**

- focused on people, including staff, at all times
- focused on continuous improvement in their day to day work
- skilled in involving staff in decisions and improvements
- skilled at recognising and appreciating staff
- confident in identifying and resolving poor performance
- visible and good at listening and communicating
- engaged, encouraging and inspirational
- supportive, fair and consistent.

## 6. Our strategic objectives

Strategic Objective 1: to provide assurance and build confidence through robust regulation and independent evaluation of care settings

Strategic Objective 2: to contribute to building a rights-based world class care system in Scotland

Strategic Objective 3: to support peoples' understanding of high quality, safe and compassionate care by promoting standards and quality of service they should expect and make sure their voices are heard

Strategic Outcome 4: to build capacity within care settings to make sure there is high quality development and improvement of rights based care across Scotland

Strategic Objective 5: to support and inform local and national policy development by providing high quality, evidence based advice and information

Strategic Objective 6: to perform effectively and efficiently as an independent scrutiny and improvement body and work in partnership with others

## **7. The environment we work in**

The Christie Report outlined the four pillars of public sector reform necessary to deliver outcomes that matter to people in Scotland while ensuring the financial sustainability of our public services. This means that, like all other public services, the Care Inspectorate must do more with less in a way that delivers quality and customer excellence.

The Public Services Reform (Scotland) Act 2010 includes the duty of co-operation which requires us to collaborate closely with other scrutiny and improvement bodies and national policy makers. The regulation, audit and inspection activities of scrutiny bodies should be co-ordinated to ensure qualitative approaches, efficiency, effectiveness and economy for all those involved. We work closely with other bodies such as Healthcare Improvement Scotland, Education Scotland, Audit Scotland, and Her Majesty's Inspectorate of Constabulary Scotland to co-ordinate our scrutiny activities so that regulation, inspection and audit across Scotland are efficient, effective and duplication is reduced.

We also play a key role in improving the quality of care across community planning partnerships in collaboration with the above scrutiny bodies as well as other bodies including the Joint Improvement Team, Improvement Service, Mental Welfare Commission, NHS National Education Services and Scottish Social Services Council. We work closely to co-ordinate our individual and collective contribution and responsibility to support improvement activities and make a tangible difference to the quality of care.

We are also required under the Public Services Reform (Scotland) Act 2010 to evidence continuous improvement in our statutory responsibilities for Duty of User Focus. Putting people who use services and their carers at the heart of our work is critical to improving the quality, design and delivery of care across Scotland as well as making a significant impact in shaping our business activities and national policy developments.

To support public service reform we are currently working within a national policy environment that is undergoing unprecedented change that directly impacts on our scrutiny and improvement role. There are a number of legislative and social policy changes including those to aid joint working across public bodies and support the integration of health and social care and those that will improve national provisions and practice for children and young people. These, alongside reviews of the National Care Standards and community justice services across Scotland, mean that there has never been a greater imperative to collectively work together to review how we design, deliver, scrutinise and improve.

Such unprecedented change will inevitably lead to new ways of working across health and social care that puts person-centred, high-quality, safe and compassionate care that reflects individual needs and promotes their rights at the forefront of policy and practice. This will support the realisation of Scottish Government's vision "that by 2020 everyone is able to live longer healthier lives at home or in a homely setting".

At the same time there are a number of strategies to support national policy delivery that informs our work. These include: Self Directed Support, Mental Health Recovery, Dementia, NHS Quality Strategy 2010, Public Bodies (Joint Working) Act 2014, Public Services Reform Act 2010, Children and Young People's Act and GIRFEC to name but a few.

Such transformational change requires fresh and creative thinking and strong leadership that embeds human rights principles at the heart of all that we do; promotes partnerships and co-produced approaches; fosters a culture of quality and innovation; and, invests in our workforce so that we have people with the rights skills in the right place to contribute to delivering these ambitions.

## **8. Quality Improvement Strategy**

The quality improvement strategy sets out new approaches to meeting and exceeding the Care Inspectorate's aspirations of being a world class scrutiny and improvement body, developing and delivering excellence across all its scrutiny and improvement functions and business activities so that people who use services are protected and are confident about the quality and safety of care in Scotland. It underpins the delivery of our strategic objectives within our Corporate Plan 2014-2018 and informs the development and implementation of Organisational Development Strategy.

It builds upon the positive actions and achievements outlined within the interim quality assurance framework and follows up internal audit recommendations dated January 2014. It identifies three key quality ambitions that will provide a firm foundation and leadership direction to make sure that we put people who use services and their carers, our employees, providers, delivery partners and stakeholders at the heart of all that we do.

By focusing on people we will strive for continuous measurable improvements in all areas of our work, strengthening public confidence in the rigour, credibility, specialist knowledge and professional judgements used to deliver assurance, protection, innovation and improvement so that Scotland's social care and social work services are rights based, person-centred, safe, compassionate and of high quality.

With increasing financial constraints, technological advances, increasing societal expectations and significant demographic changes with many people living longer, combined with vast differences in the experiences and outcomes for people within and between local communities we need to develop flexible regulatory practices and integrated and outcomes focused scrutiny and improvement activities that foster a culture of quality, innovation and partnership working. We will act as a catalyst for

such practices so that service design and delivery evidences ever improving and aspirational standards in the quality of care that people in Scotland have a right to expect.

Early intervention and prevention, integrated health and social care pathways, partnership working and co-operation and a true focus on enabling people who use services and their carers to have a voice, choice and control are fundamental to achieving positive, meaningful qualitative outcomes for everyone in Scotland. Continuously improving our performance through designing flexible but consistent scrutiny and improvement and business practices while working closely with community planning partners and health and social care partnerships will be key to supporting social change in how high quality, safe and compassionate care is designed, commissioned and delivered.

We know that the key to success in delivering this Quality Improvement Strategy is the need for significant commitment, strong leadership at all levels, and investment in our employees so that we do things right and do the right thing. We firmly believe that quality improvement is everyone's responsibility and with our collective knowledge, skills and expertise combined with working in a co-produced way with people who use services, their carers and other stakeholders we can continuously improve practices, process and policies across all our scrutiny and improvement work to achieve customer excellence. This will enable successful achievement of our quality ambitions, quality goals and support quality improvement actions to deliver our Corporate Plan's strategic objectives.

## **9. Quality Improvement Strategy Plan**

The purpose of this strategy is to support the achievement of the Care Inspectorate's Corporate Plan 2014/18 vision and six strategic objectives.

In principle, this strategy will:

- Contribute to innovation and support improvement in the quality of care across Scotland so that people who use care services, their families and carers experience good outcomes that reflect their needs, rights and choices.
- Build the capacity of the sector through our scrutiny and improvement interventions so that we can collaboratively support changes to the ways in which care is designed, commissioned and delivered to ensure safe, compassionate and high quality care.
- Strive for continuous improvement within all Care Inspectorate business activities so that we evidence our efficiency, effectiveness and public value as a scrutiny and improvement body.

The strategy will be delivered through three quality ambitions.

## **10. Our Quality Ambitions**

Our three quality ambitions of people, partnership and performance focus on delivering high level goals supported by improvement interventions. Each of these will be broken down into operational actions in the attached action plan at Appendix 1.

## **10.1 People**

We will put people at the heart of all that we do so that we deliver customer focussed excellence in all areas of our work

### **Key goals:**

- Our scrutiny and improvement activities focus on providing robust protection and assurance to contribute to world class rights based safe, high quality and compassionate care
- Our staff feel valued, are well motivated and see themselves as influencers and leaders in shaping the organisation's strategic direction, providing protection and assurance on the quality of and future of care in Scotland
- Our key stakeholders - people who use services, their families and carers, staff working in services, providers and commissioners are listened to and their feedback and experience is triangulated to provide evidence on the quality of care

### **Improvement interventions**

- We will refine our scrutiny and improvement processes so that they are even more focused on people aiming to provide high quality customer service at the first point of contact through to earliest resolution
- We will strengthen how our staff are actively involved in contributing to and shaping organisational objectives, leading programmes and projects to improve the organisation and /or informing organisational development, direction and decision-making

## **10.2 Partnership:**

We will work in partnership with people who use services and their carers, scrutiny, delivery and policy partners so that we maximise involvement, improvement and innovation in all our scrutiny and improvement activities.

### **Key goals:**

- The scrutiny experience for people who use care services, their families and carers and providers is fair, transparent, timeous and makes sure that care is rights-based, safe, compassionate and of high quality
- Our relationships and partnerships are effective and built on an ethos of collaboration fostering respect, trust and collective ownership to ultimately improve the quality of care

### **Improvement interventions**

- We will further improve our involvement, communication and engagement activities so they are genuinely co-produced and person-centred and focus on real-time feedback from people who use services, their families, carers, providers, public and our staff
- We will develop new approaches to scrutiny and improvement making sure that any new way of working is influenced and informed by those who are directly impacted upon so that our business activities drive protection, assurance, improvement and innovation

### **10.3 Performance**

We will build a learning organisation that continuously improves its practices, policies and performance

#### **Key goals:**

- Our scrutiny activities will be proportionate, risk based and evidence informed so we target our finite resources to make sure people who use services are safe and receive high quality care that is rights based and reflects their needs and choices.
- Our improvement activities will support collaborative working, build capacity across the care sector, share good practice and contribute to innovation so that people who use care services experience improved quality of care
- Our business processes will be efficient, effective and person-centred to maximise our performance, transparency, accountability and public value

#### **Improvement interventions**

- Our scrutiny methodologies and processes will be systematically reviewed to ensure they are efficient, effective, customer focused and embed continuous improvement activities to ensure our stakeholders have a positive experience of their engagement with the Care Inspectorate
- Our improvement activities will be targeted and undertaken in partnership at local and national levels to share good practice; support the development and implementation of care sector improvement tools; build the capacity and competence of the workforce and, provide the most up-to-date clinical advice and expertise where required to sustain safe, compassionate and high quality care
- Our practices and processes across all business activities will include a stronger focus on quality assurance, transparency and public value to embed a culture of learning, continuous improvement and innovation that enhances performance and accountability

### **11. Approaches to quality improvement**

There are a number of different approaches to quality improvement using recognised tools and philosophies for example: Total Quality Management; Root Cause Analysis; Plan, Do, Study, Act; Six Sigma; and, LEAN. This strategy does not set out to explore the merits of each of these rather the quality improvement tool utilised will be dependant on the project or scenario. For example, where the Care Inspectorate is required to work in partnership to investigate a failing care home it may use Root Cause Analysis techniques as an initial approach to identifying issues that impact on qualitative outcomes for residents.

Conversely, other tools such as LEAN or a combination of Plan, Do, Study, Act and Six Sigma may be used to identify more efficient, effective ways of working to derive added value that ultimately impacts on the quality of our scrutiny and improvement or business process leading to improved experiences for people using services and their carers or other stakeholder such as providers and delivery partners.

What is important rather is our commitment to becoming a learning organisation; one that focuses on building a culture that strives for continuous improvement; that recognises mistakes are a vital part of the learning cycle; and, that fosters an operating environment that encourages and values our employees for new ways of

thinking, trying tests of change and embracing qualitative working practices that strengthen our role in providing assurance and protection for people who use services and their carers.

We will achieve this through building quality improvement actions to act as the golden thread joining together our Corporate Plan Strategic Objectives, Operational Improvement Plan which contains a number of improvement and change projects and our Organisational Development Plan to ensure we realise our Quality Ambitions of people, partnership and, performance.

## **12. Delivery and Measurement of our Quality Improvement Strategy**

Delivery of our quality ambitions and goals will be a significant part within our overall programme management approach to managing organisational development and change. The Executive Team, acting as the Programme Board, oversees and makes decisions on each programme and related projects, prioritising activities and resources as necessary while ensuring good programme governance and accountability.

Each programme and project will have a specific focus where appropriate on quality improvement aligned to the three quality ambitions and clear deliverables to evidence improvement.

To make sure that quality improvement is embedded in all our business activities we will use the European Framework for Quality Management to identify through self-evaluation where we are now; where do we want to be; what does success look like. Each quality ambition, goal and improvement intervention is broken down into measurable details in Appendix 1 Action Plan. This action plan is intended to be dynamic and respond to changing operational requirements through a process of self-reflection and self-evaluation.

This will support further development of the Care Inspectorate as a learning organisation and evidence its achievements. This approach will inform and evidence organisational development initiatives and progress across a range of activities and ensure correlation with the development of a new Performance Development and Review System so that individuals across the organisation can evidence their learning, experience and development needs.

It will also support quarterly performance reporting on Key Performance Indicators, Quality Indicators and monitoring measures to the Care Inspectorate Board.



**Action Plan**

**Note: this is a dynamic action plan which will reviewed regularly the Executive Team / Programme Board as required.**

**Quality ambition: performance-focused actions**

Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success  KPI	look like?  QI
We do not have a process to resolve simple complaints about care services through mediation at frontline	We want to resolve as many complaints as possible through frontline mediation as evidence tells us this is best for complainant and complained about	Develop frontline resolution process for resolving simple complaints	3, 6	Performance People	New frontline complaints process  Communication strategy for raising awareness  Mediation training for complaints inspectors	KA / ES	% of complaints resolved at frontline within the specified number of working days  Complainant satisfaction on resolution, after 6 months  No of media articles / website hits  No of staff trained and qualitative feedback on training	Complainant and provider experience  Complainant and provider feedback  Staff feedback on qualitative training  Complainant satisfaction

Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success  KPI	look like?  QI
We have a new procedure for investigating complaints about the Care Inspectorate	We want the procedure to be embedded and staff to be confident about applying it	Develop staff confidence and experience at following the procedure	6	Performance People	Appropriate development support for staff investigating complaints	KA / ES	% of complaints about the Care Inspectorate resolved within the specified number working days  Complainant satisfaction on resolution, after 6 months  Fewer appeals to SPPO	Complainant and staff experience  Views of SPPO
There is no robust or systematic quality assurance process for inspection reports	We want to produce high-quality inspection reports which reflect the evidence, inform the public, free from errors	Develop a QA process and develop inspectors and admin staff as appropriate	1, 3, 6	Performance	New process for QA of inspection findings and inspection reports	KA / RO	% of reports issued on time	Feedback from people using and providing services  Comments received through the error response form

Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success  KPI	look like?  QI
					New inspection writing guidance and developmental support  Improvements to IRT system for writing reports		No of requests for changes to our inspection report at draft stage reduces	
We have a historic approach to PDRS, and implementation is inconsistent	A more tailored form of PDRS is embedded across the organisation an linked to an OD strategy which supports development of staff and the delivery of core business	Ensure managers and staff are confident about a new approach and use it to support development and performance, demonstrating that we are a learning organisation	2, 4, 5	People Performance	A new OD strategy, including a learning and development policy, to support a changing organisation  A new system of PDRS which is linked to the strategy  A new system for recording PDRS on Pulse	GW / JG	Number of PDRS' completed  No of staff undertaking identified training needs and qualitative feedback on staff development sessions.	Staff feedback on PDRS process

Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success  KPI	look like?  QI
We have migrated to an largely online approach for care services to interact with the Care Inspectorate but have not evaluated or interrogated it from a provider perspective	A system of online interaction with Care Inspectorate which is online-based, tested, and delivers a high level of customer satisfaction	Review and improve our current ways of online provider interaction with the Care Inspectorate	1, 4, 6	Performance	User experience testing of eForms, with consequent improvements made  Better online registration functionality  Improved online complaints facility	GW / EM	Number of seamless transactions online which do not require queries to the relevant helpdesk.	Provider feedback
We have an ICT system for frontline service inspection which has developed organically and is sometimes insufficiently flexible	We have an ICT system which meets our methodological needs for scrutiny and improvement, which staff find easy to use, and which is responsive to design change	Make a decision on the future operation of the ICT system	1, 6	Performance	Improved user experience of our ICT system  A clear roadmap for continued investment or replacement	GW / EM	Number of calls made to ICT helpdesk	Inspector and admin feedback.

Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success KPI	look like? QI
		Plan improvements in a programme approach, aligned to methodological and business needs						
We do not have a programmed or strategic culture of internal customer satisfaction across the organisation	We are recognised as having a culture of internal customer support, with a focus on supporting colleagues who are improving outcomes for people using care services	Follow a structured programme of improvement, possibly linked to an accreditation scheme	6	Performance	Clear expectations and understandings of internal customer focus	GW, JG	Efficiency and speed of implementing agreed changes	Feedback from staff

Quality ambition: people-focused actions

Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success KPI	look like? QI
We have a one-size-fits-all approach to care service inspections which has, historically, been too focused on inputs and compliance, and is insufficiently transparent	A new framework for inspection is in place to which places a focus on outcomes and the experiences of people using services	Design a new methodology for inspection and implement it	1, 2, 3, 4, 5, 6	People Performance	A new methodology framework  A new set of business processes  A workforce confident and skilled to deliver a new methodology	KA / RO	Number of inspections undertaken, broken down by different types of inspection	Feedback from people using care services  Feedback from providers of services  Feedback from our staff
We have an on-going policy review programme to ensure our staff policies are up-to-date, understood, and supportive	A new suite of policies is in place, staff are confident and engaged with them, and managers are familiar with their responsibilities	Continue the review programme and implement associated training and support	2, 4, 6	People Performance	Current policies are reviewed in accordance with the agreed timescale  Key new policies, such as competence and social media, are agreed and introduced	GW / JG	HR statistics on how policies are used and	Feedback from staff and managers

<b>Where are we now</b>	<b>Where do we want to be</b>	<b>What do we need to do</b>	<b>Strategic Objective No:</b>	<b>Quality Ambition/s</b>	<b>Deliverable</b>	<b>Lead</b>	<b>What will success KPI</b>	<b>look like? QI</b>
Levels of internal engagement are low and require to be improved	There are high levels of engagement, with staff empowered and confident	Progress actions from the Partnership Forum survey and develop approaches to internal communication and engagement	5, 6	People	Review and refresh the Internal Communications and Engagement Strategy  Refresh and develop the intranet to support staff practice and engagement	KA / RO	Future Partnership forum surveys  No hits and user experience pathways on the intranet	Qualitative data on engagement of staff in key decision-making

Quality ambition: partnership-focused actions

Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success  KPI	look like?  QI
A programme of inspection volunteers supports our inspection in some areas of inspection	A wide range of people support our inspections across many service types and types of inspection	Expand our inspection volunteer programme into new service types and expand the number of inspection volunteers	1, 2, 3	Partnership Performance			Number of inspections involving an inspection volunteer, by service type	Feedback from people who use services
We ask for views from people who use care services only as part of an inspection or if they wish to make a complaint	People who use care services can share their views with the inspector at any point	Develop ways of capturing real-time information about care services from people using them	1, 3	Partnership Performance	Online feedback from people who use services  A systematic way of using and responding to that feedback	KA / RO / GP	Number of people who provide feedback  Number of CSQs / online CSQs returned	Feedback from inspectors and people using care services



Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success KPI	look like? QI
We carry out joint and concurrent inspections of services with scrutiny partners in some service types	We have a coherent approach to joint inspections of frontline services involving different scrutiny and improvement agencies	Develop a shared understanding with other scrutiny partners about joint working and the duty of co-operation	1, 2, 4, 6	Partnership Performance	MOUs to be reviewed and developed  Changes to our inspection methodology	KA / RO	Number of inspections involving another scrutiny body or partner	Reduced duplication of inspection and improved efficiency across the scrutiny landscape
Our website is not accessible to people looking for a care service or wishing to find our more about the care service they use	We have commissioned improvements in our website	Ensure the commissioned changes are effective and support improved user experience	3, 5, 6	Partnership Performance	An improved website experience for users	KA / RO	Number of visits to websites  User journeys on website analytics are simplified	Feedback from people using and providing care services

Where are we now	Where do we want to be	What do we need to do	Strategic Objective No:	Quality Ambition/s	Deliverable	Lead	What will success KPI	look like? QI
We do not currently have a clear policy on our improvement interventions in care services, and our scope to support improvement	We have a clear improvement strategy, tools, approaches and improvement ambassadors in care services where we identify that improvements are required, with support to develop the care sector workforce	Develop an improvement intervention framework to support improvement in care services, and associated support	2, 4, 5	Partnership	Staff development and support to promote improvement  Improvement tools  Improvement ambassadors  Implementation of health team review	KA / RP RO	Number of improvement interventions which take place	Feedback from inspectors, providers, and users of care services