APPENDIX 1: POSSIBLE NEW SUCCESS REPORTING MEASURES FOR 2016/17 – PROPOSALS

Strategic Objective 1: We will give public assurance about the quality and standard of social care in Scotland.

Type	Measure	Purpose	Comments	Implementation timescale
KPI	% of providers and health and social care partnerships who tell us that our scrutiny interventions help them to improve Target: 90%	To provide an indication of impact and of the level of assurance given by our frontline work, both in regulated care and strategic scrutiny	Existing approaches capture this in respect of a sample of regulated and strategic inspections. Will be improved by further design work with the sector and people using services. We could use a gradiated approach in seeking answers.	Q1 for regulated care and strategic inspection and expanded over time to all key processes (complaints, registration, improvement interventions).
KPI	% of high-risk services where we have carried out an inspection in-year Target: tbc	To provide assurance that we are providing risk-based and targeted scrutiny	No changes required.	Q1
KPI	Inspection/improvement time spent on services with at least one grade of adequate or worse as % of total inspection/improvement time Target: tbc	Used to illustrate proportionality - that we spend more of our activity in the poorest performing services to support improvement	We will need to capture high quality data on the time spent on inspection and improvement, and find analogous measures in strategic scrutiny & improvement.	tbc

Type	Measure	Purpose	Comments	Implementation timescale
MM	% services where grades have improved (or good grades maintained) since start of the year	To monitor impact of our work over the longer term and to provide assurance	No changes required, but we must be careful when interpreting changes to grades when making changes to methodology	Q1
MM	% providers who improve assessed grades following improvement interventions	To evidence our contribution to improvement	In the long term, we should seek to expand this to strategic scrutiny also.	Q4. This will require agreement on the nature of an improvement intervention
MM	% services with any grade of weak, unsatisfactory or adequate for two inspections or more	To monitor impact of our work over the longer term and to provide assurance	as above	Q1
MM	% of registration applications that do not proceed due to concerns about ability to provide a quality service	To provide assurance by demonstrating our gatekeeping role to ensure that only good quality services enter the sector.	May require some system and process modifications. Agreement needed on what point withdrawn applications would count.	Q2
MM	% newly registered services with requirements made / poor grades at the first inspection	To provide evidence of the robustness of our registration process	Specific criteria need to be developed around grades or requirements	Q2
MM	Number of child and adult protection referrals made	To monitor our contribution to public assurance and partnership working	A new policy has been agreed which will support more consistency and better recording	Q3

Strategic Objective 2: We will inform and influence local, national and international policy development.

Specific KPIs would not capture adequately our success in influencing policy, and so success on meeting this objective will be more qualitative in nature. This will be achieved by the developed use of case studies in the short and longer term, the use of comments from those using and delivering services about our impact and vignettes to illustrate the range of our work in this area. One suggestion for a measurable KPI is below.

This strategic objective will also describe our:
- consultation responses and, where possible, our impact on policy
- activity in pursuit of our corporate parenting responsibilities
- contributions around how the Care Inspectorate has helped to "secure better or further effect" commitments in the UN Convention on the Rights of the Child (which we must, by law, report against every three years) and other appropriate conventions in respect of older people and people with learning disabilities.

Type	Measure	Purpose	Comments	Implementation timescale
KPI	% of people who say our national reports and publications are useful Target: 90%	To demonstrate our impact in informing national and local policy	We would need to define the audience from which we are seeking information – this might vary by publication. It may also include online analytics of downloaded reports.	Q4. Data on this not collected at present and so further development is required/

Strategic Objective 3: We will listen to the voices of people receiving care services, and their families, ensuring they understand what they should expect from services.

Type	Measure	Purpose	Comments	Implementation timescale
KPI	% inspections involving an inspection volunteer and the number of people using services and carers those IVs speak to Target: tbc	Demonstrates our performance in involving people with experience of using care in our work	Will not include inspections where IVs are not used (childminders).	Q1
KPI	% of complaints that are investigated within the desired timescales Target: 80%	Demonstrates the central role of the views of people and their carers using services and our intelligence-led scrutiny	Currently this is within 40 days of registering the complaint. New complaints process will require changes in timescales.	Q1
KPI	% of people who say our reports help them make choices about the care services they use Target: 90%	To demonstrate our duty of user focus and responsibility for public reporting	This data is not collected at present.	tbc
MM	% services with >90% of respondents happy or very happy with the quality of care	Ensures that we are listening to and prioritising the voice of people using services and their relatives and carers	CSQs capture these views but significant improvements can be made to this process, including using online.	Q1
MM	% of complainants who tell us their complaint was resolved and care improved	Ensures we are responding to the views of people who use care services, and their carers	This recommendation arose from the complaints research commissioned in 2013 but would require new mechanisms to capture this information.	tbc

Type	Measure	Purpose	Comments	Implementation timescale
MM	Number of people whose views are heard as part of an inspection	Demonstrates our duty of user focus	May require changes to recording processes for inspection activity and a clearer definition, especially in early years. Returned CSQs and data from IVs are extant. We may also wish to consider capturing the number of people we tried to involve in our inspection work.	Q2

Strategic Objective 4: We will operate effectively, efficiently, with integrity and with a customer focus to remain an excellent independent scrutiny and improvement body.

Type	Measure	Purpose	Comments	Implementation timescale
KPI	% of registration applications that are completed within time following payment of the relevant fee. Target: 80%	Demonstrates good customer service, compliance with the Regulator's Code and EU directive, and proactivity in supporting registrants	No changes required, but this measure will differ from those used previously as will include all cases, irrespective of whether any delays are caused by external factors or by us.	Q1 using previous calculations, but Q3 using a revised approach

KPI	Staff absence rate, segmented by type

Target: tbc | Helps to better interpret performance against other measures | Precise method for calculation to be discussed with OD colleagues | Q2 |
| KPI | Staff vacancy levels, segmented by type | Helps to better interpret performance against other measures | Precise method for calculation to be confirmed | Q2 |
| KPI | Complaints about CI completed within SPSO-recommended timescales

Target: 70% | Demonstrates good customer service | No changes to reporting mechanism needed, but discussions still on-going with SPSO around when their clock starts ticking | Q1 |
| KPI | Projected variance from budget | Demonstrates effective financial management and scope to address performance through investment | Method for calculation confirmed | Q2 |
| KPI | % of audit recommendations that are met within timescale

Target: 80% | Demonstrate good governance arrangements | This information is collected but not currently part of our performance framework | Q3 |
| MM | Number of grievances made and upheld within appropriate timescales | Demonstrates responsive management | This information is collected but not currently part of our performance framework | Q2 |

MM	Progress against agreed Best Value Schedule of audit reviews	Demonstrates effective management		Q2

Possible future measures

KPI	Measures of staff satisfaction, including possible tools for measuring more regularly outwith the staff survey by using a "temperature check" approach	Demonstrates that we are listening to staff and acting on feedback.	Suggested measure was "% staff who would recommend CI as an employer". The mechanism for collecting this data is not established.	2017/18
KPI	Access to staff development and training, and what the impact of that is	Shows our investment in staff to maintain a professional and competent workforce.	The mechanism for collecting this data is not established.	2017/18
KPI	% of partners who say we share information and intelligence effectively	Shows our wide interpretation of the duty of co-operation	Data for collecting this could be built into new approaches around intelligence profiles.	2017/18

Additional performance reporting measures

The following annualised reporting data to be collected and considered as part of the performance measurement framework

- Annual environmental sustainability report
- Annual reporting statement on compliance with information governance responsibilities
- Annual reporting on our progress against the public sector equality duty.