

Minutes

Meeting: Policy Committee

Date: 18 May 2016

Time: 10.30 am

Venue: Room 0.24, Compass House

Present: Paul Edie, Chair
Mike Cairns
Anne Haddow
Anne Houston
David Wiseman

In Attendance: Karen Reid, Chief Executive
Rami Okasha, Executive Director of Strategy and Improvement
Gordon Weir, Executive Director of Corporate and Customer Services
Kenneth McClure, Head of Legal Services
Fiona Angus, Committee Support Officer

Apologies: Kevin Mitchell, Executive Director of Scrutiny and Assurance

Item	Action
1.0 APOLOGIES FOR ABSENCE	
Apologies were noted, as listed above.	
2.0 DECLARATION OF INTEREST	
There were no declarations of interest.	
3.0 MINUTE OF PREVIOUS MEETING HELD ON 9 MARCH 2016	
The minute of the meeting held on 9 March was reviewed and approved as an accurate record, with the following adjustments:	

Item 9.0

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The agreement by the Committee regarding historical information on re-registered providers to be added to the Action Record.

Terminology within the minute, where reference is made to “service users”, to be amended to show “people who use services and their carers”. As a general issue, this terminology to be applied to all Care Inspectorate documents.

4.0 ACTION RECORD OF MEETING HELD ON 9 MARCH 2016

Under the action at Item 6, which had been completed, it was also noted that further information regarding the integration of health and social care had appeared in the Public Audit Committee Legacy Paper, published in March. It was agreed that a weblink to the Legacy Paper would be circulated to members.

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The Action Record was reviewed and amended to show an additional action under Item 9.

5.0 MATTERS ARISING

There were no matters arising.

BUSINESS ITEMS**6.0 SHARING MARKET OVERSIGHT INTELLIGENCE PROFILES WITH THE SECTOR – REPORT NO: P-06-2016**

The Executive Director of Strategy and Improvement presented the report, which set out proposals around better provision of localised care market information. At this initial stage, the proposals had not been fully costed but the Committee was invited to comment on the proposed approach.

The report outlined the current move towards a more integrated landscape, the responsibilities on integrated joint boards for the strategic commission of services and the resultant interest in ensuring access to a range of data sets about care provision. It presented proposals around an enhanced role for the Care Inspectorate in sharing real-time robust data and intelligence to help support the development of policy.

It was made clear to members that the proposals were not concerned with predicting or commenting on the viability of services. The proposals focussed on developing periodic market oversight profiles, which would be of sufficient quality to be shared around risk, intelligence and other matters that might impact on the provision of

care. For illustration purposes, the Appendix to the Report provided an example of an intelligence profile produced for the delayed discharge work.

Members agreed that the proposals were very positive. On the matter of viability of services, the Committee discussed the adverse impact of service closures, particularly in the case of a large UK-wide provider. The Chief Executive informed members that the Care Quality Commission was currently undertaking some work in this area, focussing on the larger providers, and there was scope for the Care Inspectorate to be kept informed of this work. The Committee agreed with this approach.

The Committee asked to what extent local authorities had recovery plans in place in the event of cessation of significant service provision. It was noted that, due to a mix of provision, the range of challenges facing local authorities differed by partnership area. It was noted that the Care Inspectorate participated in a Scottish Government / CoSLA contingency group which met in the event of impending closure of a service or provider which may be challenging to manage.

Some discussion followed on the legal aspects of the Care Inspectorate providing data, the fee/charging element and intellectual property rights. At the current time, the organisation did not apply copyright on any of its published materials.

The Committee agreed that the Report should be revised to reflect the discussion on the legal aspects of data provision, with a recommendation to the Board that the Report be approved. EDSI

Members also requested a briefing note on the number of UK-wide providers that were currently operating in Scotland. EDSI

7.0 THE IMPACT OF THE CARE INSPECTORATE'S CONSULTATION RESPONSES – REPORT NO: P-07-2016

The Executive Director of Strategy and Improvement presented the Report, which was a first-time assessment of the organisation's impact on policy development and influencing.

The Committee was informed of the 47 individual consultations or calls for evidence that the Care Inspectorate had responded to in the 12 months to March 2016 and the means by which the organisation had co-ordinated those responses. The assessment work had considered how the Care Inspectorate's responses had been taken into account or helped to influence changes. It also recommended regular review of the impact of consultation responses to ensure that robust responses were prepared that were evidence and knowledge-based.

Version: 2.0	Status: <i>Approved 31/08/16</i>	Date: 30/08/2016
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The Committee sought more information on Board members' involvement in the co-ordination of consultation responses, the decision-making process on which consultations were pertinent to the organisation and identification of contributors.

The Chief Executive explained that, in the case of proposed changes to national policy, comments from the Board would be sought, having firstly been considered by the Policy Committee and Board Development and Strategic Events. In consultation with the Chair, the Chief Executive identified which matters required specific Board involvement, including those that might pose a risk or have an impact on the Care Inspectorate. The Care Inspectorate's approach was to avoid subjective responses and ensure that they were evidence-based. It was agreed that Board members would be kept apprised of forthcoming consultations.

CSO

The Committee noted the Report.

8.0 THE WORK AND POLICY DIRECTION OF THE UK CARE REGULATORS APRIL 2016 – REPORT NO: P-08-2016

The Executive Director of Strategy and Improvement presented the Report, which outlined the responsibilities, strategies and change proposals of each of the care regulators in the United Kingdom.

The purpose of the Report was to identify what progress those other regulatory bodies had made, new ideas for change, any criticisms they had encountered in implementing change and how successful, or otherwise, those changes had been. Information was provided on Ofsted, Care Quality Commission, Care and Social Services Inspectorate Wales, and the Regulation and Quality Improvement Authority.

Members were also informed of the Care Inspectorate's interaction at European level, with the Executive Director of Strategy and Improvement having recently attended a conference of Health and Care Regulatory & Supervisory Agencies in Sweden. One of the issues raised at the conference was the effect that over-emphasis of scrutiny could have on improvement. It was noted that the European Partnership for Supervisory Organisations in Health Services and Social Care (EPSO) had asked its members to consider this issue and report back to the conference in 12 months' time.

Members asked for more information on EPSO, including its membership and the type of regulatory structures that were in place across Europe.

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Members noted and welcomed the Report as an important source of information for the business of the Policy Committee.

Version: 2.0	Status: <i>Approved 31/08/16</i>	Date: 30/08/2016
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Frequency of inspection rules for regulated care services Summary Guide 2015 - 16

This table sets out the frequency of inspection for different service types. The Care Inspectorate may inspect more often than shown on this table.

Services Subject to Statutory Minimum Frequency:			
Service Category & Type	Definition of Better Performing Services	Minimum Frequency for Better Performing Services	Minimum Frequency for Services not Meeting the Better Performing Definition
Care homes for older people	Low RAD & Grades 4 or more	1 inspection each 12 months	2 inspections each 12 months
Care homes for children	Low RAD & Grades 4 or more	1 inspection each 12 months	2 inspections each 12 months
All other adult care homes	Low RAD & Grades 4 or more	1 inspection each 12 months	2 inspection each 12 months
Support services – Care at Home Housing Support Service combined with Care at Home	n/a	n/a	1 inspection each 12 months
	n/a	n/a	1 inspection each 12 months
Secure accommodation	n/a	n/a	2 inspections each 12 months
Risk Based Minimum Inspection Frequency:			
Service Category & Type	Definition of Better Performing Services	Minimum Frequency for Better Performing Services	Minimum Frequency for Services not Meeting the Better Performing Definition
Adoption services	n/a	n/a	1 inspection each 12 months
Adult Placement services	n/a	n/a	1 inspection each 12 months
Childcare agencies	Low RAD & Grades 3 or 4 or more	1 inspection each 36 months	1 inspection each 12 months

Care Inspectorate Inspection Plan Summary 2015 -16

Service Category & Type	Definition of Better Performing Services	Minimum Frequency for Better Performing Services	Minimum Frequency for Services not Meeting the Better Performing Definition
Childminders - Large	Low RAD & Grades 4 or more	1 inspection each 24 months	1 inspection each 12 months
Childminders – Small	Low RAD & Grades 4 or more	1 inspection each 48 months	1 inspection each 12 months
Day care of children (Registered for 0-16 years i.e. under 3s)	Low RAD & Grades 4 or more	1 inspection each 24 months	1 inspection each 12 months
Day care of children (registered for 3-16 years i.e. no under 3s)	Low RAD & Grades 4 or more	1 inspection each 36 months	1 inspection each 12 months
Fostering services	n/a	n/a	1 inspection each 12 months
Housing support (not combined with Care at Home)	Low RAD & Grades 4 or more	1 inspection each 24 months	1 inspection each 12 months
Mainstream schoolcare accommodation and hostels (in first 2 inspection years of registration)	n/a	n/a	1 inspection each 12 months
Mainstream schoolcare accommodation and hostels (after 2 inspection years of registration)	Low RAD & Grades 5 or more	1 inspection each 36 months	1 inspection each 12 months
Nurse agencies	Low RAD & Grades 3 or 4 or more	1 inspection each 36 months	1 inspection each 12 months
Offender accommodation services	n/a	n/a	1 inspection each 12 months
Residential special schools	Low RAD & Grades of 4 or more	1 inspection each 12 months	2 inspections each 12 months
Support services - adult day care	Low RAD & Grades 4 or more	1 inspection each 36 months	1 inspection each 12 months

***RAD refers to Regulatory Assessment Document**

Notes

1. References to “in each 12/24/36 months...” refers to actual inspection year(s) as opposed to 12/24/36 etc months from previous inspection date.
2. Inactive childminders must be inspected in the inspection year that they revert to ‘Active’ status.

9.0 HORIZON SCANNING REPORT 2016-17 – REPORT NO: P-09-2016

The Executive Director of Strategy and Improvement presented the Report, which was a new initiative to update members on key legislative and non-legislative developments in 2016-17. In particular, the Report highlighted the following:

- New legislation under the Carers (Scotland) Act 2016 and the Community Justice (Scotland) Act 2016
- Ongoing implementation of previously passed legislation, including the Children and Young People (Scotland) Act 2014
- Actions taking forward new and existing national policy developments, including the National Action Plan to Prevent and Tackle Child Sexual Exploitation

The Committee noted and welcomed the Report and it was agreed that circulation would be widened to all Board members.

CSO

10.0 ENGAGEMENT WITH MEMBERS OF THE SCOTTISH PARLIAMENT – REPORT NO: P-10-2016

The Executive Director of Strategy and Improvement presented the Report, which outlined the key findings of a 2015 survey undertaken by Ipsos MORI on behalf of the Scottish Social Services Council to help the organisation understand its own, and other organisations', profiles and reputation amongst MSPs. The organisations included the Care Inspectorate, General Teaching Council for Scotland and the Nursing and Midwifery Council.

The Report also updated members on the Care Inspectorate's continuing engagement with MSPs and the need to ensure that, in particular, new MSPs were made fully aware of the work of the organisation. It was intended to promote and raise the profile of the Care Inspectorate through ministerial engagements and visits, events, media engagement and working with cross-party groups.

The Committee noted and welcomed the activities outlined in the Report.

11.0 MANIFESTO COMMITMENTS FROM THE SCOTTISH PARLIAMENTARY ELECTIONS

The Executive Director of Strategy and Improvement presented the briefing paper, which had been prepared in the run-up to the Scottish Parliamentary elections on 5 May, outlining the key pledges from each of the Scottish political parties.

Prominence was given to the commitments likely to form or influence government policy, and their relevance to the work of the Care Inspectorate, but it was agreed that it would be important to establish relationships with all MSPs elected to the Scottish Parliament.

The Committee noted the Report.

12.0 DRAFT POLICY COMMITTEE ANNUAL REPORT TO THE BOARD – REPORT NO: P-11-2016

The Executive Director of Strategy and Improvement wished to record thanks to the Committee Support Officer for preparing the first draft.

The Committee noted the Report and had no further comments to make, other than reference to “care service users” be changed to read “people who use services and their carers”.

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STANDING ITEMS

13.0 POLICY AND PARLIAMENTARY TRACKER: FEBRUARY-APRIL 2016 – REPORT NO: P-12-2016

The Executive Director of Strategy and Improvement presented the report. Members noted the information in relation to the recent inquiry by the Local Government and Regeneration Committee into the governance arrangements for arm’s length external organisations and recommended that this matter be noted in the context of strategic inspections.

14.0 NATIONAL CARE STANDARDS UPDATE

The Executive Director of Strategy and Improvement updated the Committee on development of the new National Care Standards (NCS). He informed the members about the workshops that were being held to consider the person-centred aspects of the new standards. A new pocket guide was distributed to members that set out the new principles and how these were to be used. Members were also encouraged to visit the NCS website for regular updates.

15.0 SERIOUS CASE REVIEW – VERBAL UPDATE

The Executive Director of Strategy and Improvement confirmed that there were no serious case reviews to report on.

16.0 SCHEDULE OF COMMITTEE BUSINESS

The Committee was satisfied with the current Schedule of Business and had no new business to add.

Version: 2.0	Status: <i>Approved 31/08/16</i>	Date: 30/08/2016
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17.0 IDENTIFICATION OF RISK

The Committee agreed that the Horizon Scanning work being undertaken by the Policy Team should be cross-referenced with strategic risk assessment.

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18.0 AOCB

There was no other business.

19.0 DATE OF NEXT MEETING

The date of the next meeting was noted as Wednesday 31 August 2016 at 10.30 am, Compass House, Dundee.

Signed:



Paul Edie
Chair (and Convener of the Committee)

