



Joint Inspections of Services for Adults/Older People

Methodology review Dynamic Action Plan

Background

This project led development of the methodology for joint inspection of services for adults has been agreed between Healthcare Improvement Scotland (HIS) and the Care Inspectorate (CI) as part of a wider on-going review and refining exercise originally led by John Glennie and David Wiseman. The purpose of the joint review is:

“to consider the scope, effectiveness and impact of the current strategic inspections of adults/older people in the context of this changing scrutiny landscape and how that should be refined and developed over the course of 2016/17 and beyond”.

The Scrutiny Question to be answered is **“How well do (integrated) services support the health, safety and wellbeing of (insert people/ adults/older people) in (insert area to be inspected)?”**

Development Area	Current Status	Target Completion Date	Lead	Accountability/ Management Supervision	Tasks	Update/Progress
1. Establish Operational Management (OMG)	Complete	04/2016	Claire Sweeney (CS)/Kevin Mitchell (KM)	<ul style="list-style-type: none"> Short Life Working Group (SLWG) Operational Management Group Glennie/Wiseman review until 15.9.16 CEO HIS/CI 	To provide leadership and operational management to enable the completion of the review of Strategic Joint Inspection of Adults Services (SJIAS).	Group established and regular meetings now set up.
2. To identify risks that would affect project completion	Complete	15/08/16	Carol Crowther/ Lawrie Davidson	<ul style="list-style-type: none"> Operational Management Group CS/KM Glennie/Wiseman 	Develop a risk matrix around the project plan.	Active document available which will be routinely reviewed and updated for consideration at each Operational Management

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			(CC/LD)	review until 15.9.16		Group meeting.
3. Principles of Inspection	Complete	13/05/16	SLWG Operational Management Group	<ul style="list-style-type: none"> Glennie/Wiseman review until 15.9.16 CEO HIS/CI 	Agree the principles of: <ul style="list-style-type: none"> Joint working Partnership Improvement Involvement of users of services Confidentiality Shared learning Reporting Culture of inspection 	Meeting of 13/05/16 identified and agreed the core focus of future inspections. Information shared with High Level Advisory Group (HLAG) June 2016 and agreed.
4. Identify the specific areas of focus in – Public Health for future inspections and framework	Complete	12/2016	Sally Shaw (SS)/Caroline Arnott (CA)	CS/KM	Agreed at HLAG on 15 August that the component area would include Health Inequalities	<ul style="list-style-type: none"> Identified as a new task at OMG meeting 28/07/16. Discussed and agreed at HLAG on 15/08/16.
5. Map national drivers and standards to the agreed focus areas for inspection	In progress	28/08/16 Revised Date October 2016	SS/CA	Helen Happer/Jacqui Macrae (HH/JM)	Create a core suite of integration indicators that will support the inspection focus. To include: <ul style="list-style-type: none"> National Care Standards; National Health and wellbeing outcomes; Integrated outcome indicators; and Other relevant health and social care measures. 	<ul style="list-style-type: none"> Mapping key policy documents into the QI framework to ensure the current key drivers are represented. Consultation with wider team to be undertaken. Link to work on handbook. To be signed off at Operational Management Group meeting October 2016

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6. Quality Indicator Framework	In progress	31/12/16 for re launch in period 01/17 – 02/17	SS, Emma McWilliam (EMcW), CA, John Skouse and Linda Connelly Irene Barclay	HH/JM	To refresh the QI framework for publication on website. To link to Communication Strategy Map to Quality of Care framework	<ul style="list-style-type: none"> • Links with task of mapping national drivers. • Discussed and agreed at HLAG on 15/08/16. • Consider learning from Older People Acute Hospital (OPAH) review consultation. • To engage with HLAG 7 November 2016
7. Inspection Plan to be agreed for 17/18 inspections based on <ul style="list-style-type: none"> • Risk • Intelligence • Scoping 	Started and linked to National scrutiny plan discussion and scoping work to date.	31.12.16	HH/JM	CS/KM	<ul style="list-style-type: none"> • Agreed criteria • Links with national scrutiny plan • Scope risk – linking with scoping work • Scope resources • Consider future follow up / post inspection improvement focus 	Discussions under way. <ul style="list-style-type: none"> • Potential areas for follow up identified
8. Resource Planning – to include from scoping identifying what type of clinical expertise required for	In progress	Process commenced June– complete by 31/12/16	CS/KM	CEO Board of HIS/CI	A review of resourcing to be undertaken to ensure we have an efficient deployment of staff Identify and agree resourcing for new inspection process, following agreement on inspection model/ framework.	Meeting of 18 April & 13 May identified gaps in current resource structure/ application of required and available skills i.e. <ul style="list-style-type: none"> • Information Analyst skills • IT data base development and shared access • Appropriate clinical lead • Health inspector capacity

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each inspection site.					This will include consideration of: <ul style="list-style-type: none"> • Analysis of Intelligence to support target areas • clinical experts required for each inspection that will support the clinical assurance needs of HIS • Inspection process • Admin tasks • Skills required from inspectors, including clinical skills/ knowledge • Leadership • Quality assurance process • Follow up review and improvement engagement 	Ongoing discussions around resources and resource planning
9. Joint training and development plan for joint team	Complete	Skeleton outline to be completed by 15/08/16. Links to PDA in progress date to be identified Resource consideration link to development	HH/JM	CS/KM	Revise and develop a team development and training plan that supports the inspection framework and model of inspection. It should provide opportunity to support staff (individual and group) to develop skills and knowledge. Link to “ craft of inspection” development of CI Professional Development award (PDA)	Operational Management Group has begun discussions and now progressing to next stage of delivery.

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		area			<p>Identify resources to support training jointly and by each agency</p> <ul style="list-style-type: none"> • Links to reporting template and guidance to ensure inspectors are familiar with how recommendations are to be framed. <p>Links to reporting template and guidance to ensure inspectors are familiar with how rationale for grading in summaries to be implemented</p>	
10. Recruitment and training plan for associate inspectors, clinical leads, patient partners and volunteer inspectors.	In progress	09/2016	HH/TBC	CS/KM	<p>Revise and develop a recruitment and training plan that will support the wider inspection team inclusive of associate inspectors, clinical and patient partners, and local file readers who support inspection framework and model of inspection. It should provide opportunity to support staff (individual and group) to develop skills and knowledge. This review should take account of feedback sought and received.</p>	<p>Feedback questionnaires returned and comments collated to inform work</p> <ul style="list-style-type: none"> • This work links with staff training plan and resourcing considerations

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					Link to scoping development area and resource planning development area	
11. Inspection Handbook	In progress	31/12/16	Martha Shortreed (MS)/CA	SS/JM	Develop a single system guidance/handbook on inspection for team and partnerships, reflecting the agreed processes, tools and timelines, including the Quality Assurance (QA) process and responsibilities. This will include an outline of the inspection footprint.	<ul style="list-style-type: none"> • Discussed at OMG meeting 21.9.16 • The team are in the process of developing guidance for staff carrying out the new approach to joint strategic inspections, including clarity in the process for joint sign off and QA. • There is work underway to consider how this can be developed as a web based resource in the longer term.
12. Information leaflets for public and partnerships	In progress	31/12/16	Caroline Arnott, Helen Samborek, Maureen Johnstone	SS/ JM	In consultation with the Communications leads and involvement colleagues, design and develop an information leaflet to be available on HIS/ CI websites and in general public areas such as GP practices, libraries etc. The leaflets will inform the general public about the joint inspection task and how they can be involved or be asked to be involved.	

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13. Standardising the briefing process	In progress	31/12/16	Stephen Rankin, Amelia Macdonald , John Skouse	SS/CA	To develop a presentation template and checklist for engaging with Chief Officers at beginning of inspection	
14. Standardising professional Discussions	In progress	31/12/16	Stephen Rankin, Amelia Macdonald , John Skouse	SS/CA	To develop for inspectors, stakeholders and have included in the hand book and timeline the following <ul style="list-style-type: none"> • Definition of Professional Discussions • Purpose of each discussion • Who will be involved • How information will be recorded and reported • Quality assurance and evaluation process to measure added value 	
15. Scoping – processes <ul style="list-style-type: none"> • To develop interagency scoping through large data collection and 	In progress	Inspection tool to be ready for testing out in Edinburgh & Borders inspection beginning 08/2016	Leslie Marr (LM)/Winnie Burke (WB)	SS/JM	<ul style="list-style-type: none"> • To test out new scoping processes in Edinburgh inspection. • Development of the Joint Inspection for Children (JIC) scoping tool for application for the inspection of Edinburgh. • Engagement with external/internal leads for 	<ul style="list-style-type: none"> • Sub group established and working well on engagement at external and internal levels re resources and sources of data. • An evaluation of the on-site scoping and engagement changes in Orkney Inspection to be completed to inform the Edinburgh & Borders

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analysis <ul style="list-style-type: none"> • To develop scoping tool for use in inspection for evidence gathering and analysis purposes • To be able to use scoping to identify skill set and numbers for team – especially clinical experts 		Final large scale scoping tool product to be completed 31/08/16. Revised date for large scale scoping tool - 31 .12 16 for use from February 2017			collecting data relating to Integrated Joint Boards (IJB). <ul style="list-style-type: none"> • Identification of analyst's resource required to support inspection process. • Agreement of process of scoping and where it sits in timeline – see below. • Link with resource planning • Link with recruitment and training • OMG to sign off 	inspections. <ul style="list-style-type: none"> • Tools to go to November 2016 HLAG for advice and information
16. Timeline/ footprint for new inspection process	In progress	12/2016	Admin – Paul Reilly (PR)/Angela McBain (AMcB) Inspection – SS/CA	<ul style="list-style-type: none"> • Operational Management Group • CS/KM 	<ul style="list-style-type: none"> • Develop revised inspection timeline for new process (footprint). • Develop revised admin inspection timeline to support new process. • Set out purpose of each task/component in the time line. • Consider any resource 	Work in progress. Close links being established with handbook work and other test areas such as <ul style="list-style-type: none"> • Scoping • Professional Discussions • Interface with people who use services • Report writing

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					requirements to support changes. <ul style="list-style-type: none"> • Ensure QA is built into each stage of process. • Build in Communication strategy tasks to timeline – including pre inspection and post inspection work – scoping and report 	<ul style="list-style-type: none"> • Quality Assurance
17. To strengthen the file reading tool to improve balance between Health and Social care	In progress – to be tested out in Edinburgh and Borders inspection	<ul style="list-style-type: none"> • Final template to be ready 1 April 2017 inspection plan 	Jane Brown (JB)/John Scouse (JS)/Cat Hutchinson (CH)/Helen Samborek (HS)	SS/CA	To develop an evidence gathering template <ul style="list-style-type: none"> • Testing question template in Edinburgh inspection at File reading week • Roll out to Borders • Evaluate after Edinburgh and Borders Inspections 	Development work underway.
18. (a)To develop a project plan to support a different approach to gauge patient/ service user experience and effectiveness. A sample may include, case tracking and file review. This	In progress	Project Plan outline completed 01/09/16	CA	SS/JM	Develop a project plan to support a new method of case tracking including file reading and interviews with individuals and groups. To be agreed by OMG 20/9/16	Project plan completed Update given to OMG 21.9.16 using a progress template

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<p>process will allow opportunity to follow people through the health and care pathway.</p> <p>(b) to agree plan and test out in a partnership area and evaluate</p>					<p>OMG to agree test site and completion date</p>	<p>In progress</p>
<p>19. New approach to engaging with stakeholder groups</p>	<p>In progress – evaluation of Orkney to be completed New approach identified using Communications Strategy – to be tested out in Borders</p>	<p>Testing in Orkney. Post Orkney evaluation to be commenced 08/2016 for learning to support further roll out in Edinburgh and Borders inspections</p>	<p>Richard Fowles (RF)/Amelia MacDonald (AMacD)</p>	<p>SS/CA</p>	<p>To improve the efficiency of engagement with stakeholder groups including shortening of footprint and improving experience for stakeholders.</p> <p>Link to Communications strategy</p> <p>create links to each HB area Health Council</p> <p>Flexibility of approach – link to scoping</p>	<ul style="list-style-type: none"> • Fieldwork completed. • Evaluation still to be undertaken of scoping/engagement and learning rolled into planning for Edinburgh. <p>Development of communication strategy has identified further opportunities to engage with stakeholders at earlier stage in process and use information as part of scoping</p>

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20. Links between scrutiny, inspection and improvement post inspection	Options paper completed Next stage to be agreed by OMG October 2016	Initial draft options paper produced 06/06/16 – completed Date to be set for completion	Steven Wilson (SW)/Chris Lewis (CL)/Richard Fowles	<ul style="list-style-type: none"> • SS/CA • Operational Management Group to sign off 	Develop an outline for inspection follow up particularly where evaluation identifies weakness in key areas.	<p>Paper drafted – discussed at OMG on 21 September 2016. To be discussed by wider group October, then to HLAG on 17 Nov 2016 for advice / information.</p> <p>Operational Management Group wants to consider the joint and separate responsibilities of CI & HIS to ensure we are capturing the improvement and scrutiny responsibilities of both organisations.</p>
21. Reporting template and guidelines	In progress	Report template To be developed and ready for use for reporting of the Edinburgh inspection.	Ian Kerr (IK)/CH/SS	HH/JM	<ul style="list-style-type: none"> • Revise and consider the chapter headings for reporting and provide for inspectors and admin clear report writing guidance including structure etc. complete • Link to file reading to be more explicit to ensure questions support reporting template • Orkney report will reflect agreed headings. • Ensure that learning from previous inspections are considered and where appropriate adopted into 	<p>HLAG have been consulted about proposed headings/must do areas. Chapter headings agreed</p> <p>Work to begin on mock report and development of guidelines.</p> <p>Support issues for team identified.</p> <p>Links to Communication strategy</p> <p>SS has developed guidance for completion of chapters which supports improved evaluation of</p>

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					<p>new approach.</p> <ul style="list-style-type: none"> • Guidelines to ensure agreed HIS/CI corporate styles are reflected to support joint report. • Links to training and development plan to ensure: <ul style="list-style-type: none"> ✓ agreed guidelines ✓ framing and implementing recommendations <p>Summary and rationale for grading</p>	evidence.
22. Quality Assurance Framework	In progress	12/2016	Helen Happer (HH)//Jacqui Macrae (JM)	OMG	<p>Agree the QA process at every stage of inspection and set out in handbook and the inspection timeline.</p> <p>QA process to include outline of roles and responsibilities for QA, including lead inspector role and role of senior managers.</p> <p>QA to include signing off of reports</p>	Work in progress. Each sub group has now been asked to identify the QA process for those aspects of work they are progressing.

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23. Review the refreshed methodology to ensure added value for Care Inspectorate, HIS and partnerships		Completion and evaluation of test areas by 31/3/17 and ongoing	CA/SS	CS/KM	<p>Using evidence based learning measure impact of refreshed methodology, tools and report template.</p> <p>Build into the QA and feedback process of each test of change and all future inspections post April 2017 to ask question around added value and ensure learning points for future inspections</p>	On agenda for OMG 20 September
24. Develop a Communication strategy.	<p>In progress.</p> <p>To use Edinburgh and Borders inspection to test out communications timeline</p>	31/12/16	HIS/CI Comms teams	CS/KM	<p>A communication strategy to be developed which includes publication of report and media links, this to be built into inspection timeline to ensure the model of inspection is communicated widely to</p> <ul style="list-style-type: none"> • All agencies • General public <p>Opportunity identified at communications meeting of 16/ 09/16 to use communications strategy to support scoping process - “listening and learning events”</p> <ul style="list-style-type: none"> • consideration of flash reports of inspections “so far” 	<p>First meeting with coms colleagues and inspectors 16/09/2016.</p> <p>Consideration of a webinar for 01/2017 – 02/2017.</p>

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					<ul style="list-style-type: none"> consideration of rewriting leaflet to link with Webex design of leaflets for public and partners Carolyn and Sally to provide date of current forums to Coms team 	
25. Partnership Agreement/ MOU/ protocols	Yet to start	31/12/16 31/12/16	Operational Management Group CEO HIS/CI	CEO HIS/CI	<p>The Memorandum of Understanding (MOU) to set out roles and responsibilities around information sharing, communication and QA processes to be drafted, agreed and signed off.</p> <p>Protocols to be drafted that sets out key issues that includes operational governance arrangements and process of escalation in the event of dispute or disagreement</p>	<p>Discussed at Glennie / Wiseman review meeting 15 September.</p> <p>To be taken forward with OMG</p>

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26. Conclusion of all tasks on action plan and development of new action plan to take into inspection year 17/18	To begin	31.3.17	OPG	CEO HIS/ CI	To provide assurance to Boards that the 16/17 methodology review is complete and that any outstanding tasks and or identified new tasks will be taken forward in a 17/18 action plan that will be developed and progressed by OMG	To be agreed at OPG meeting January 2017.