



2017-18
Quarter 2
Performance report

Success measures (key performance indicators)



1: Public assurance and building confidence

Statutory inspections complete. Target 99%
96%
(1,123 statutory inspections completed)

2: Informing policy

People who say our national reports and publications are useful. Target 90%
Aiming to report in 2017/18

- Colour code**
- Red** significantly below target
 - Amber** slightly below target
 - Green** target achieved
 - Blue** no target, data only
 - Purple** data not available

3: Supporting people's understanding of high quality care and making sure their voice is heard

Inspections involving an inspection volunteer.
280 inspections completed that included an Inspection Volunteer in Q1 and Q2.

Complaints about care that are investigated within the relevant timescales. Target 80%
77%

4: Efficiency and effectiveness, excellence, cultural change, workforce and collaborative working

Registration applications completed within timescales
Target 80%
84%

Staff absence rate
4.1%

Complaints about us completed within SPSO (Scottish Public Services Ombudsman) recommended timescales.
82%

Strategic Objective 1:

We will give public assurance and build confidence that social care and social work in Scotland is rights-based and world class, through robust and independent scrutiny and improvement processes.

1: Public assurance and confidence

Key priority 1.1:

We will deliver an inspection programme across strategic and regulated care scrutiny which focuses our activities in the areas of highest risk, whilst ensuring we inspect all partnerships and care services regularly and robustly. We will register new care services proportionately but robustly to ensure they meet the right standards. Our inspection methodology and business processes in strategic and regulated care scrutiny will develop to support the new National Care Standards, using a human rights and wellbeing based approach to help ensure the highest standards of safe, compassionate care for people using services. We will make sure that the views and experiences of people using services, and their carers, are central to our scrutiny and improvement work.

KPI 1: % first statutory inspections completed

96% (1,123 inspections) completed up to 30 September 2017
(95% [1,103 inspections] in the same period last year)

Total number of scrutiny and improvement interventions to 30 September 2017

7,863

(7,676 in same period last year)
See page 23 for more details.

Strategic Scrutiny

Inspection reports were drafted in Q2 for joint inspections of services for children and young people in West Lothian, Inverclyde and a progress review for Western Isles. Preparatory work continued in Q2 for our inspection in East Ayrshire. In Q2 we reported to the High Level Advisory Group that we had received final approval from the Minister for the proposal for joint inspections of services for children and young people beyond April 2018.

In respect of services for Adults, preparatory work took place for the first joint inspection under a revised model in North Lanarkshire. In Q2 we have prioritised revision of the Quality Indicator Framework for adults, through a small group comprising inspectors from the Care Inspectorate and inspectors and clinical experts from Healthcare Improvement Scotland, to ensure we can deliver on revised joint inspections of strategic planning. In Q2 we commenced the initial phases of the thematic review of adult support and protection arrangements, with the establishment of a stakeholder reference group, confirmation of inspection sites and development of inspection tools.



1: Public assurance and confidence

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Rami Okasha, Executive Director of Strategy and Improvement

Key priority 1.2:

We will ensure that our outcome-focused inspections identify how care services contribute to people's wellbeing and reduce health and social inequalities, meaning we can help improve care where people do not experience the standard of care they should. We will use evidence and intelligence to assess risk and plan scrutiny and improvement interventions for both regulated care services and joint strategic inspections of community planning partnerships and joint integration boards. We will assess how well strategic plans and joint strategic commissioning take into account and deliver positive outcomes that meet the needs and choices of people in local communities.

Through the Health and Social Care Standards Implementation Project, we are working collaboratively with the Institute for Research and Innovation in Social Services to carry out a study and produce a good practice resource. The study will bring together people experiencing care at home, commissioners, providers and staff to explore what professional care relationships based on compassion and human rights should look like. This will help all stakeholders, including the Care Inspectorate, to implement the newer aspects of the Standards relating to compassionate and rights-based care.

As part of the National Care Home Contract working sub group we have written a report in Q2 for the Convention of Scottish Local Authorities to showcase our support for innovation, where appropriate, and identify good practice through case studies in relation to the skills mix of staff in care homes for older people.

Improvement workshops have taken place, with more planned for this year, for inspection staff and providers to build capacity and capability for improvement.

Registration inspectors are working with the Scottish Borders Council to support the development and implementation of the authority's winter plan. We are facilitating the opening of a closed unit for a temporary period over the winter to reduce delayed discharge, provide a suitable alternative to older people and support the local authority with meeting recommendations made in the strategic inspection.

In September we published "Scotland's Early Learning and Childcare – report on the progress of expanded provision". This report followed the collation of information during inspections on the provision of the newly established funded early learning and childcare for two year olds. Scottish Government have acknowledged the key points in the report and have included areas such as staff induction and supporting personal planning within the Quality Action Plan for the expansion of early learning and childcare by 2020.

1: Public assurance and confidence

Kevin Mitchell, Executive Director of Scrutiny and Assurance and
Rami Okasha, Executive Director of Strategy and Improvement

Key priority 1.3:

We will develop and implement an improvement strategy to underpin the Care Inspectorate's role in supporting care services and local partnerships to improve and attain the highest standards of care for people. This will describe how we will support improvement in collaboration with others, what we will do when improvement is too slow, and show how we will share examples of excellent practice in care. This will encourage learning and innovation, help services and the social services workforce to build capacity, and give greater public assurance about high standards of care.

The Care About Physical Activity (CAPA) programme has now been running for 6 months and the first set of learning events were evaluated during Q2. The progress report from this evaluation shows that the learning events led to care staff enhancing their knowledge, confidence and ability to support older people to move more. There was a statistically significant improvement in a number of care professionals' understanding about the perceptions of physical activity amongst older people, and their confidence to affect change. For example, there was a measurable and positive change in the degree to which participants in the learning event felt confident to promote movement with older people experiencing care. In addition to learning events for care service staff, an internal development programme has been building knowledge and confidence for scrutiny staff working in this area.

During Q2, we developed our new improvement strategy, which will be formally launched in Q4. We led various pieces of improvement support activity in anticipation of this, including in palliative care, medicines, food, pressure ulcers, and early years nutrition.

'My World Outdoors', last year's practice resource promoting outdoor play, continues to exert considerable influence nationally and internationally. We are producing further resources promoting good practice for the early learning and childcare sector.

'My Childminding Experience' was produced collaboratively with the Scottish Childminding Association and launched by the Minister for Childcare and Early Years in September. It shows the particular benefits for children attending childminders and supports local authorities commissioning childminders to provide funded hours as part of the current expansion. This complements our publication 'Your Childminding Journey', which is a learning and development resource for childminders that we developed on behalf of Scottish Government and was published at the same time. Drawing on effective practice identified through our scrutiny activity, these two resources demonstrate the Care Inspectorate's ability to play a leading role in the early years improvement agenda by showcasing practice which we know has a positive impact on people's experiences and outcomes.

In Q2 we produced a new publication, 'Our Creative Journey'. It shares good practice examples and how children benefit from expressive arts activities. Like 'My World Outdoors' and 'My Childminding Experience', it involves practitioners narrating their own stories of children's experiences. However, 'Our Creative Journey' extends this model further by focussing on how individual children have benefitted and involves the child themselves and their parent(s) in telling their story. The publication will be formally launched in February 2018.

1: Public assurance and confidence

Kevin Mitchell, Executive Director of Scrutiny and Assurance and
Rami Okasha, Executive Director of Strategy and Improvement

In Q2 Early Learning and Childcare registration inspectors have been supporting Local Authorities with their expansion plans for 1,140 hours provision by 2020. The 'Space to Grow' publication has been promoted in Q2 and local authorities and planners have welcomed this resource. This has particularly encouraged local authorities to consider the use of outdoor space in a positive way to improve outcomes for children as well as helping them meet the expansion plans of the Government.

Strategic Scrutiny:

Following the implementation of new management arrangements in the Care Inspectorate and a realignment of responsibilities, we wrote to chief executives of local authorities and health and social care partnerships to let them know of action we have taken to confirm and strengthen our linking arrangements with them. We know from feedback collected in a number of different ways, that chief officers and their staff, and the chairs and lead officers of strategic partnerships, greatly value having identified individuals in the Care Inspectorate with whom they can maintain regular contact and meet routinely to discuss emerging issues. Our aim is to ensure that we provide them with designated contacts who can build knowledge of their area and the services they provide and commission.

Following the publication in June 2017 of *'Education Governance: Next Steps – Empowering our teachers, parents and communities to deliver excellence and equity for our children'*, 6 Regional Improvement Collaboratives (RICs) have been established. There is an expectation that each of the RICs will have representation from the Care Inspectorate and Education Scotland. In Q3 we wrote to the six RIC leads advising them of their nominated Care Inspectorate Relationship Manager

We have largely prioritised improvement activities in two areas where inspections have shown significant concerns – Edinburgh and Moray. We have strengthened our link inspector resources in both of these areas and have given attention to working with officers to direct their improvement efforts clearly towards a manageable number of priorities. We will be carrying out follow through inspection activity in both of these areas in due course.

We have continued to contribute to both the Audit Scotland-led Shared Risk Assessment process and the Sharing Intelligence for Health and Care Group focused on health board areas, which in Q2 focussed on Glasgow where we have recently conducted an inspection of services for Children and Young people.

1: Public assurance and confidence

Kevin Mitchell, Executive Director of Scrutiny and Assurance and
Rami Okasha, Executive Director of Strategy and Improvement

Case Studies

In Q2 we have heard from service providers adapting how they recruit using Care About Physical Activity based questions during the interview phase as well as others who have used the 'Making Every Moment Count' publication as part of the staff annual review and one to one supervisions. In addition we have seen community connections being forged on the back of Care About Physical Activity. Staff have shared some examples:

- A secondary school who invited the local care home to participate in a French lesson and another care home who invited the local school children to harvest their apple tree to use the fruit for Halloween celebrations.
- Another Care Home for Older People showing improvement in regards to risk management and being less risk adverse. This has allowed greater participation from residents and a sense of purpose from being involved in meaningful activities.
- A care home resident was formerly a head domestic sciences teacher but since their stroke they had a dense left sided weakness, which made them feel depressed and not valued. They were unable to knit anymore. The staff supported them to find a way to support their left knitting needle to help them resume knitting. Although still very emotional about their disability, they are able to contribute to the knitting of poppies which will be sold in aid of the poppy campaign later in the year, which has increased the resident's sense of personal value and wellbeing.

While inspecting a care home in Angus, inspectors found significant failings and adult support and protection incidents which had not been reported on to the appropriate agencies. Inspectors were concerned that these incidents reflected a pattern of abuse by one staff member, who was subsequently suspended while the investigation took place.

We worked closely with the local council to support the service and develop their understanding of roles and responsibilities with regards to adult support and protection. We will examine in future inspections the extent to which these improvements have been embedded and the impact this has had on vulnerable adults.

From this diagnostic work, links with the council have been developed, through joint work between inspectors and council staff. Input to support further improvement in the local authority is being supported by the Improvement Support Team and inspection team through the planned delivery of improvement workshops.



Strategic Objective 2:

We will inform local and national policy to contribute to ensuring a world class care system in Scotland, through intelligence-led, risk-based, and evidence-based approaches to scrutiny and improvement.

Rami Okasha, Executive Director of Strategy and Improvement and Kevin Mitchell, Executive Director of Scrutiny and Assurance

Key priority 2.1:

Improve the way we collect, analyse, present and use intelligence. This will help us keep pace as the way care is delivered changes. We will develop our systems to be able to better use data and information that is available to us, both to inform our own work and the work of others.

Care Inspectorate intelligence and data

Our development activities in this area have been developed into a programme approach, to establish intelligence systems, processes and procedures that will easily enable the appropriate Care Inspectorate staff access to information about care services so that staff can make proportionate, risk based decisions about the quality of care and any necessary scrutiny and improvement interventions. During Q2, we supported all our intelligence team to attain a nationally recognised professional qualification in intelligence analysis. We began testing and formalisation of a Care Inspectorate Intelligence Model that is compatible with the 'National Intelligence Model' using across policing, and will support scrutiny and improvement methodology.

In Q2 we began to publish our first "open data" datasets in the form of regular summaries of key statistical information, including numbers of services and grading profiles. Providing public access to this information on our website will reduce some of the routine information requests we deal with, both internally and externally.

The Datastore is a valuable source of information about individual care services, as well as providing summaries on quality at an aggregate level. We have had feedback from a range of staff working in local authorities and health and social care partnerships that they find the Datastore useful for strategic planning, maintaining an overview of the quality of services from which they purchase and provide care, and for planning for major changes such as the expansion of early learning and childcare. During Q2, we improved access to the Datastore to make it easier for a wider range of people to use the data.

We undertook analysis during Q2 on adoption and fostering statistics, following a major change to the data we collect which had been planned in close consultation with service providers in the field.

We have entered into an updated Memorandum of Understanding with the Scottish Social Services Council to better support the sharing of information.

2: Informing national and local policy

Rami Okasha, Executive Director of Strategy and Improvement and

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Key priority 2.2:

Developing our intelligence together with partner agencies, publishing evidence based reports and promoting examples of validated national and international good practice in the rights based delivery of integrated health and social care. We will develop a programme of evidence based publications to inform local and national policy; these publications will include thematic reviews, statistical information, learning from serious incident reviews and significant case reviews, complaints and public protection work.

We published and promoted across digital, press and social media channels:

- Scottish Borders adults' joint inspection report
- West Lothian children's joint inspection report
- Western Isles Children's services progress report
- Statistical report on early learning and childcare services
- Early Learning and Childcare IFA expansion report
- My Childminding Experience, a good practice resource
- Care News flagship magazine
- We also launched the online learning resource for childminders, My Childminding Journey

This year's Early Learning and Childcare Statistics report was published in September. Compared to last year we have produced more detailed data and included more analysis of trends and what this means for the early learning and childcare sector. The publication is a particularly valuable resource for policy makers, planners and commissioners at this time of considerable investment in the sector. The publication was also reported in several national newspapers.

In Q2, progress continued on the Dementia Inspection Focus Area report, including the analysis of inspection findings, for publication in Q3.

Since Scotland's new Health and Social Care Standards were launched by the Scottish Government in June, we have been raising awareness and preparing to implement from April next year. We have given keynote addresses at numerous conferences and much of our external communication refers to the standards.

All registered services and local partnerships have been sent a copy of the Standards with an expectations letter from the Chief Executive, and we are involving provider organisations in developing the methodology for inspecting against the Standards.

2: Informing national and local policy

**Rami Okasha, Executive Director of Strategy and Improvement and
Kevin Mitchell, Executive Director of Scrutiny and Assurance**

Key priority 2.3:

Develop our contribution and exposure to trends, research and innovative practices emerging from national and international partners. We will work together with partner agencies to identify emerging themes, trends, good practice, innovative models and areas of concern across all care service types and in the strategic provision of early learning and childcare, integrated health and social care, social work, and community justice. We will ensure that our activities act as enablers to the development of new and innovative models of care which can support better outcomes for people.

During Q2, The Hub continued to develop as a mechanism for signposting and sharing good practice and innovation. As well as continuing to populate both the good practice and policy libraries on the site; specific Care Inspectorate publications were highlighted on the front page, which included 'Space to Grow', 'My Childminding Experience' and 'Your Childminding Journey'.

We have planned a longer term project restructuring the Improvement section to better reflect the improvement work of the Care Inspectorate, anticipating the forthcoming launch of the improvement strategy, and to continue to provide a space for good practice examples.

Practice examples continue to be highlighted on the site through the continued development of 'Spotlight' sections on subjects such as Dementia and Bowel and Bladder. Work has been on-going in Q2 for the launch of a new 'Spotlight' section on food and fluid.

We are involved with research at Glasgow Caledonian University on Understanding Sedentary Patterns of Behaviour and supporting an event at Victoria Quay in Q3 to disseminate current findings. We also worked with Stirling University who have researched and are developing a tool to support care services to enable people living with dementia to be more active in care.

During Q2, we developed comprehensive briefings on a wide range of policy issues including children's rights, legislation and guidance; the Scottish Government's Programme for Government 2017-18; and the Competition and Markets Authority update report. We also provided analysis of responses to the Scottish Government's Safe Staffing consultation and a summary of responses to the Education and Skills Committee call for evidence on the Children and Young People (Information Sharing) (Scotland) Bill.

2: Informing national and local policy

Rami Okasha, Executive Director of Strategy and Improvement and

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Key priority 2.4:

Continue to support a wide range of policy development and ensure that the Care Inspectorate is ready and able to respond to emerging policy agendas. We will co-lead the National Care Standards development in a way which reflects voice, choice and control for people who use services and their carers, regardless of care setting, and ensure that principles around dignity and respect, compassion, inclusion, responsive services, and wellbeing are promulgated so as to be embedded in care service delivery.

We engaged in a range of activities which support the organisation in engaging with and responding to key policy developments. We have also undertaken activities in relation to monitoring, identifying and analysing the latest policy developments, research and sector activity, as well as co-ordinating consultation responses.

In Q2 the Care Inspectorate responded to the following consultations:

- Safe and Effective Staffing in Health and Social Care (Scottish Government)
- Care Home Services for Older People (Scotland Excel)
- Health and Sport Committee - Technology and Innovation Call for Views (Scottish Parliament)
- Proposed Children (Equal Protection from Assault) (Scotland) Bill (Scottish Parliament)
- The Supporting Children's Learning Code of Practice (third edition) and associated Regulations (Scottish Government)
- Education and Skills Committee - Call for evidence on the Children and Young People (Information Sharing) (Scotland) Bill (Scottish Parliament)
- Scotland's Ten Year Strategy for the Learning Provision for Children and Young People with Complex Additional Support Needs 2017-2026 (Scottish Government)
- Programme of Change for Education (Nursing and Midwifery Council)
- Consultation on the Socio-Economic Duty (Scottish Government)
- Carers (Scotland) Act 2016: Consultation on Draft Regulations (Scottish Government)
- Future of Social Care (Scottish Council for Voluntary Organisations)

Strategic Objective 3:

We will support peoples' understanding of high quality, safe and compassionate care by promoting standards and quality of service they should expect and help make sure their voices are heard.

Rami Okasha, Executive Director of Strategy and Improvement

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Key priority 3.1:

Strengthen how we listen and act upon the views and experiences of people who use services and their carers to inform and continually improve our work, including by more pro-actively seeking their views and acting on them, and co-designing wherever possible. We will continue to involve people with experience of care services in our scrutiny and improvement work and seek to become an inclusive organisation able to help empower people who use services and their carers, so that together we continue to strive for innovation, improvement and excellence in our user focus activities

Key priority 3.2:

Strengthen our role in executing our responsibilities for vulnerable people, including for those whose ability to make decisions under the Adults with Incapacity Act is restricted, and our new role as a Corporate Parent.

We continued to engage in discussions with the Office of The Public Guardian and the Scottish Government in Q2 as to possible changes to the current role of the Care Inspectorate under Part 4 of the Adults With Incapacity (Scotland) Act 2000; these changes, if agreed, would see the Care Inspectorate's role focused on providing scrutiny of practice rather than authorising specific certificates of authority in relation to individuals.

We have held two child protection development days for all early learning and childcare and children's staff across inspection, registration and complaints teams. The days will support us effectively managing concerns identified through our work appropriately and effectively, and were supported by the Children's Commissioner's office and Save the Children.

We have continued during Q2 to raise the profile of our inspection volunteer programme, and to recruit and train new inspection volunteers, including involving them in complaint investigations. They spoke to over 2,400 people experiencing care, and their carers, to understand their views and experiences.

We have also continued to expand how we gather the views of people experiencing care. We commenced a pilot in Q2 in respect of the use of the Short Observational Framework for Inspection within early learning and childcare inspections. This is intended to particularly support the observations of young children and the quality of staff interactions in these settings and draws on our experience of using this approach in adult settings. At this very early stage in the pilot, inspectors are reporting positively on the application of this approach within their inspection to provide supporting evidence on their findings on the quality of outcomes for young children.

3: Promoting standards, ensuring people are heard

Rami Okasha, Executive Director of Strategy and Improvement
Kevin Mitchell, Executive Director of Scrutiny and Assurance



Key priority 3.3:

Strengthen our approaches and develop new ways to listen and gather real-time information on the views, opinions and experiences of people using care services and their carers, and use this information to inform and co-design scrutiny and improvement interventions.

Key priority 3.4:

Develop new approaches to receiving, assessing, considering and responding to concerns and complaints raised by people about care services to ensure that our scrutiny and improvement interventions are effective, proportionate, and coherent across the range of our work

KPI 4: Inspections involving an inspection volunteer:

280 inspections in Q1 and Q2

(8% of all inspections completed)

(Compared to 322 inspections (9%) in Q2 2016/17)

MM 9: % services with more than 90% of respondents happy or very happy with the quality of care

94%

(a slight improvement compared to 93% in Q1 and Q2 of 2016/17)

KPI 5: % of complaints about care that are investigated within the relevant timescales

77% of complaint investigations were completed within 40 days

(compared to 76% last year)

[Target 80%]

We have developed a new complaints procedure for complaints about care services. This redefines 'complaints' as risk based and proportionate and will be live from 1 November 2017. Central to this will be a triage team who will risk assess all complaints and speak to complainants helping resolve concerns within 48 hours where a full investigation is not deemed necessary. More complaints will be referred back to the service provider, where appropriate, in order to seek to address these as closely to the point of service delivery as possible. The Scottish Public Services Ombudsman has confirmed that our new approach is consistent with best practice.

4: Independent, effective and efficient

Gordon Weir, Executive Director of Corporate and Customer Services

Rami Okasha, Executive Director of Strategy and Improvement

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Key priority 4.1:

Develop a best value approach underpinned by an efficiency saving regime to identify areas for savings, investment, and growth. This will enable us to meet future financial challenges, working collaboratively with our staff and partner bodies to continue to identify ways of reducing duplication and deploying flexible, innovative approaches to evidence public value. We will revise and strengthen our quality assurance processes and practices across all parts of the Care Inspectorate to ensure we deliver the highest quality work in a way that constantly evolves and improves.

Following on from the pilot of Lean training held in the Q2 of 2017, procurement has been undertaken to deliver a further two tranches of training over Q4 of 2017 and Q1 of 2018. The benefits from the pilot exercise were reported to the Executive Team and include initiatives such as creating a process for capturing improvements, recording actions and detailing savings and non financial benefits identified when customer service issues are dealt with by the Income Team. As the training is rolled out each of the 14 candidates in total will be asked to deliver a mini project using the methodology and associated tools of Lean Six Sigma within their area of work.

The Head of Customer Service is working with the new training provider to identify a start date for the first tranche between 15 and 22 January 2018.

The Scrutiny and Assurance Directorate launched new quality assurance processes for the planning team, regulated service and strategic inspections. These measures will be implemented in Q3. Chief Inspectors will receive quarterly reports which will contribute to the future direction of the directorate including Continuing Professional Development and methodology developments.

MM 8: % of complaints about the Care Inspectorate that are resolved through front line resolution

38% of complaints about the Care Inspectorate completed up to 30 September were resolved through frontline resolution.

KPI 9: Complaints about the Care Inspectorate completed within SPSO (Scottish Public Services Ombudsman) recommended timescales

82%
(compared to 54% last year)

4: Independent, effective and efficient

Gordon Weir, Executive Director of Corporate and Customer Services

Rami Okasha, Executive Director of Strategy and Improvement

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Key priority 4.2:

Support a programme of cultural change, to deliver an open, transparent and enabling culture which consolidates excellence, engages and empowers staff, prioritises collaboration over compliance, and demonstrates leadership at all levels.

KPI 7: Staff absence rate

4.1%

This is comprised of 0.7% short term, 0.6% medium term and 2.8% long term sickness

(compared to 3.4% in Q2 2016/17)
CIPD average for the public sector is 4.3%.

During Q2 we have continued our cultural change programme. We have drafted the Culture Change Strategy which will be considered by the senior management team. The culture leads group met in Q2 to provide ideas and thoughts around shaping the culture change programme. The ideas were based on the outcomes from the work carried out on the Unwritten Ground Rules. There is further work planned to continue the Unwritten Ground Rules work as we seek to empower staff to change and create the culture and behaviours that they want to be proud of.

The Coaching programme is well underway with 2 cohorts of managers going through the 3 day coaching conversations course in Q2. Evaluation of the course so far indicates that it is being well received with a number of staff saying it has changed their perspective and that they will act differently as a result. Half day sessions are being delivered to the wider workforce in cohorts of 30 and start in Q3. The sessions are being delivered across our main offices with a webinar set up for those who are living and working on the Islands.

The Bright Ideas scheme continues, allowing staff to suggest ideas for improvement across the Care Inspectorate's activities. On the back of the scheme we have launched our Innovation Challenge Fund where ideas are taken on further with a small quantity of funding to help support their delivery. We have identified those who have been selected to receive funding, based on a criteria, and will report further on this later in the year.

Work to develop the Reward and Recognition Strategy is planned for the next Engage in Change Forum in Q4. The forum will be instrumental in shaping the way that we recognise and celebrate success as well as identifying and developing a personal deal proposal for staff. This will outline the investment they receive for the investment we expect. The outcomes from the session will be used to draft the strategy and to develop a clear action plan to deliver. Performance Development Review System (PDRS) development continued in Q2 with the working group shaping the products through consultation. Testing of the products will be carried out from December 2017 onwards. A briefing outlining the progress to date on the PDRS has been sent out to all staff via the intranet.

Work has been completed in Q2 on the leadership behaviours and values. This involved consultation with the Engage in Change Forum. This work will also be a foundation for building the future leadership development pathways.

4: Independent, effective and efficient

Gordon Weir, Executive Director of Corporate and Customer Services
Rami Okasha, Executive Director of Strategy and Improvement
Kevin Mitchell, Executive Director of Scrutiny and Assurance

Key priority 4.3:

Develop effective and efficient ICT systems, digital services, and processes and practices, tailored to the needs of different stakeholder groups, which strive for excellence, putting the internal and external customer at the heart of all our business activities.

Training undertaken by Contact Centre team in Q2:

- An Introduction to Multi Agency Child Care & Protection
- Childminding Learning & Development Pathway
- Inspection shadowing – attended by 3 team members, all permanent Contact Centre staff scheduled to shadow an inspector in 2017

KPI 6: Registration applications completed within timescales

84%

of registrations were completed on time in Q1 and Q2 (compared to 89% last year)

The contact centre handled a total of 7982 calls in Q2.

In addition to receiving calls, the contact centre sent out over 338 registration packs in Q2 and were the first point of contact for receiving complaints and responding to queries about our e-forms system.

The most common areas for calls in Q2 were:

- General Enquiries - 1651 calls (21%)
- Staff contact details – 1181 calls (15%)
- E-forms - 1019 calls (13%)
- Registration - 906 calls (11%)
- Complaints & Concerns - 761 calls (10%)

All Care Inspectorate offices are now migrated to the Scottish Wide Area Network (SWAN). SWAN is a single public services network for the use of all public service organisations within Scotland. Key benefits include reduced costs, improved service and the ability to share data across organisations, fostering co-operative working. We are now enjoying the efficiencies associated with this public sector collaboration.

4: Independent, effective and efficient

Gordon Weir, Executive Director of Corporate and Customer Services

Rami Okasha, Executive Director of Strategy and Improvement

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Key priority 4.4:

Develop a transformational change programme to further invest in a competent, confident workforce which is empowered to support the delivery of safe, compassionate and rights-based care, including developing new career pathways and supporting the professional development of our staff in their specialisms

Our Career Pathways work has progressed in Q2. This year we have developed and launched 4 new pathways: Senior Inspectors, Strategic Inspector development pathway, Practitioner Inspector and Inspection Support Assistant. The first 2 pathways are now mainstreamed and the final 2 are part of an on-going pilot where the new roles have been recruited and will be inducted in Q3. An on-going evaluation model is being completed at each stage and overseen by the Steering Group for Career Pathways.

The Learning and Development programme and new intranet pages were launched in Q2. This sets out clear processes and policies for accessing a range of learning and development opportunities. Further work is in progress to enhance our opportunities for staff and to align development or organisational priorities.

In Q2 we have continued to build strong connections and understanding with the Nursing and Midwifery Council and Scottish Social Services Council to ensure that registration needs and Continuing Professional Development needs are met. We are progressing the development of a bespoke development opportunity with the RCN for our inspectors who are also nurses.

Our Senior Management Team attended a workshop on workforce planning in September and the follow up session is planned for Q3. After this event we will develop a draft Strategic Workforce Plan to underpin the new Corporate Plan.

A development day was held in September with senior inspectors, senior managers and team managers to support the new structures, including new senior inspector role, and highlight and share effective practice within teams.

Early indications are positive about the role of senior inspector. Team managers appreciate the support given by the new role and inspectors are also responding very well to the new post. The post also provides a further career development opportunity for inspectors.

Appendix

Performance data and management information

Additional performance reporting measures

In addition to the success measure reported in this appendix, the following annualised reporting data will be collected and considered as part of the performance measurement framework

Resources Committee Reports:

- Budget monitoring, billing of care providers, debt analysis
- Annual procurement performance
- Annual estates performance

Board Report – annual health and safety report

Annual reporting statement on compliance with information governance responsibilities

Annual reporting on our progress against the public sector equality duty.

Performance data and management information

Performance Indicator	Strategic Objective	Target	Q2 2016/17	Q2 2017/18	Notes
KPI 1 - % of statutory inspections completed	1	99%	95% (1,103 inspections)	96% (1,123 inspections)	
KPI 2A and 2B - % of providers, health and social care partnerships, people who use care services and their carers who tell us that scrutiny interventions help services to improve	1	90%	97% of staff and 97% of service users thought the quality of the care service would improve following the inspection	95% of staff and 92% of service users thought the quality of the care service would improve following the inspection	
KPI 3 - % of people who say our national reports and publications are useful	2	90%			To be reported annually
KPI 4 - % inspections involving an inspection volunteer	3	n/a	9% (322 inspections completed involving an Inspection Volunteer since in Q1 and Q2 of 2016/17)	8% (280 inspections completed involving an Inspection Volunteer in Q1 and Q2)	
KPI 5 - % of complaints about care that are investigated within the relevant timescales	3	80%	76%	77% of complaint investigations were completed within 40 days	
KPI 6 - % of registration applications that are completed within time following payment of the relevant fee, clearly differentiating between any internal and external delays.	4	80%	89%	84%	83% of registrations from Childminders and 85% of registrations from other service types were completed within timescales in Q1 and Q2. Further work is being undertaken to report further in Q3.

Performance data and management information

Performance Indicator	Strategic Objective	Target	Q2 2016/17	Q2 2017/18	Notes
KPI 7 - Staff absence rate, segmented by type	4	tbc	4.4% (0.8% short term, 0.6% medium term and 3.0% long term sickness) [2016/17 year end figure]	4.1%	0.7% short term, 0.6% medium term and 2.8% long term sickness
KPI 8 - Staff vacancy levels, segmented by inspector / non inspector	4	tbc	8.28 Inspector/ 4 Non Inspector	9.93 Inspector/ 7.08 Non Inspector	Inspection staff covers Strategic; Senior; Practitioner and Inspector
KPI 9 - Complaints about CI completed within SPSO-recommended timescales	4	Baseline year	54%	82%	
KPI 10 - % of agreed audit recommendations that are met within timescale	4	100%			Implementation timescale to be confirmed
MM 1 - % services where grades have improved (or good grades maintained) since the last inspection	1	Baseline year	98% of services that started the year with grades of Good(4) or better in all themes had maintained or improved on these by 30 September 2016	97% of services that started the year with grades of Good(4) or better in all themes had maintained or improved on these by 30 September 2017	
MM 2 – Number of Scrutiny and Improvement interventions undertaken because of changes in risk or as a result of specific intelligence	1	n/a			Further work required to define and capture other scrutiny and improvement work

Performance data and management information

Performance Indicator	Strategic Objective	Target	Q2 2016/17	Q2 2017/18	Notes
MM 3 - % of inspection hours spent in high and medium risk services	1	Baseline year		29% of inspection hours in Q1 and Q2 were spent in medium and high risk services	Note: 20% of inspections carried out in Q1 and Q2 were in medium and high risk services
MM 4 - % hours spent on improvement activity	1	Baseline year		A total of 2,281 hours spent on improvement work in Q1 and Q2 was recorded in the IRTs	Further work required on definitions and recording mechanisms in the medium term.
MM 5 - % services with any grade of weak, unsatisfactory or adequate for two inspections or more	1	Baseline year	2.5%	2.5%	2.5 % of graded services at 30 September have had any themes graded weak, unsatisfactory or adequate in their previous two (or more) inspections. All these cases, we are supporting improvement actively, and in some cases are taking enforcement action.
MM 6 - % of registration applications that do not proceed due to concerns about ability to provide a quality service	1	n/a			Further work required on definitions and recording mechanisms in the medium term.
MM 7 - % newly registered services with requirements made / poor grades at the first inspection	1	Baseline year			Reported Annually

Performance data and management information

Performance Indicator	Strategic Objective	Target	Q2 2016/17	Q2 2017/18	Notes
MM 8 - % of complaints about the Care Inspectorate that are resolved through front line resolution	3	Baseline year	21%	38%	
MM 9 - % services with >90% of respondents happy or very happy with the quality of care	3	n/a	93%	94%	
MM 10 - % of complainants who tell us their complaint was resolved fairly and care improved	3	Baseline year			Implementation timescale to be confirmed
MM 11 - Number of people whose views are heard as part of our scrutiny and improvement activities	3	Baseline year			
MM 12 - The number of people using services and carers that inspection volunteers speak with	3	tbc	2,507	2,463	Inspection volunteers spoke with 1,670 people experiencing care and 793 carers during inspections in Q1 and Q2
MM 13 - Number of grievances, dignity at work cases, and disciplinary hearing, with information on whether or not they are upheld	4	n/a			Implementation timescale to be confirmed

Summary of scrutiny interventions completed in 2017/18 up to 30 September 2017

source data: Monthly Performance Report up to 30/09/17 published on 05/10/17.

	Number completed in 2017/18 up to 30 th September	Number completed in 2016/17 up to 30 th September	Comparison of 2017/18 vs 2016/17 year to date
New Registrations completed	444	497	▼
Inspections completed	3443	3408	▲
Complaints Received	2377	2209	▲
Number of Variations completed*	1599	1534	▲

* not including typo changes to certificates

Total scrutiny interventions completed	7863	7648	▲
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