Involving People, Improving Services
The Plan 2012-15
Involving people who have experience of using care and support services and their family and carers in our work is vital not only as a public body but particularly as an organisation responsible for assessing the quality of care and support services for some of society’s most vulnerable people. People who use services are focused on the experience of using a care and support service and remind professional staff of what issues are important to them and the wider public.

It gives me great pleasure to support the work of the project team who have prepared this document and have set out how the Care Inspectorate will develop its existing involvement activities over the next three years and beyond.

I would like to take this opportunity to thank the project group which was made up of people who use services, carers and staff for their work, commitment, and enthusiasm for setting out the ‘Involvement dream’ which can be found in a picture on page 19. This Involvement Plan will be a working document, used to explain the Care Inspectorate’s commitment to involvement and to monitor our progress against the action plan and outcomes or benefits we expect to achieve from developing our involvement work.

I am pleased to see how the project team have highlighted the Care Inspectorate’s responsibilities under the Duty of Public Focus and have linked this work to the Care Inspectorate’s Corporate Plan.

It is particularly clear that the Project team see the need for the Care Inspectorate to develop a ‘culture of involvement’ in which everyone embraces the importance of involving people who use services and their carers in our work. The development of the Care Inspectorate’s Involvement Charter and the intention to make this highly visible is a creative start and I would like to state my personal commitment to supporting, promoting and contributing to the development of this culture.
Contents

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The Care Inspectorate – who we are and what we do
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Appendix 4: Co-production summary of process
People who use services told us that it would be easier for people to know what we mean explaining some of the words we use, at the beginning of the plan.

<table>
<thead>
<tr>
<th>Term/word</th>
<th>What we mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carer</td>
<td>This is an unpaid carer – family member or representative of the person who uses or has used social services. This does not include a paid worker.</td>
</tr>
<tr>
<td>Co-production</td>
<td>Is a fully inclusive way of involving all stakeholders equally in developing, delivering and evaluating services. As this paper is about service user and carer involvement our stakeholders are people who use services and their carers</td>
</tr>
<tr>
<td>Engagement</td>
<td>We agreed that this was an alternative word for involvement and participation; however we did note that unlike participation and involvement, engagement describes the relationship between people as well as the process.</td>
</tr>
<tr>
<td>Involvement</td>
<td>We have decided to use involvement as a general term to describe a variety of ways of taking part in our work.</td>
</tr>
<tr>
<td>Outcomes</td>
<td>Benefits, changes, improvements or differences that take place as a result of the work carried out.</td>
</tr>
<tr>
<td>Participation</td>
<td>We see this as an alternative word for involvement; we see that these words could be interchangeable.</td>
</tr>
<tr>
<td>PATH</td>
<td>Planning Alternative Tomorrows – a process of planning used frequently as means of person centred planning.</td>
</tr>
</tbody>
</table>
Service user

In this Plan we talk about people who use services to mean people who receive scrutinised services and have contact with us as recipients of social services.

We also talk about people who have experience of using services and carers, who want to be involved in our work on the Board, as lay assessors/inspectors and members of our ‘Involving People Group’. Sometimes we use the term ‘involved people’ to define this group.

Scrutiny

The work we do to assess the performance and quality of services. This includes - inspection, registration, handling complaints and taking action to improve or cancel services.

Strategy

A long term plan. The project group preferred to use the word ‘plan’ when producing this document.
Care Inspectorate: 
Who we are and what we do

Who we are

The Care Inspectorate is the unified independent scrutiny and improvement body for the whole range of care, social work and child protection services for people of all ages.

The Care Inspectorate is an executive non-departmental public body. This means it operates independently from Scottish Government but is accountable to it and is publicly funded.

What we do

The Care Inspectorate is governed by its Board. The Board sets the Care Inspectorate’s strategic direction and oversees and manages our performance while taking account of Scottish Government legislation and policy guidance.

We regulate and inspect care and support services. We also carry out social work and child protection inspections. Because we scrutinise individual services as well as the organisations that provide them and purchase them, we are able to bring consistent, in-depth scrutiny.

Why we do this

People in Scotland should receive the highest quality of care and support and their rights should be promoted and protected. We work hard to make sure this happens. It is our job to drive up standards of care, social work and child protection services through scrutiny of local authorities and care service providers.
Who produced this plan and how we produced it

We undertook an Involvement Review 2011. We presented this to the Care Inspectorate Board in December 2011.

The Board then asked that we to develop an Involvement Strategy, using co-production (an involvement model).

Co-production is an approach that ensures that people who use services and carers, work alongside professionals as equal partners to produce or deliver a project. In this case, this Involvement Plan.

Key features of co-production are to:
• recognise people as assets with valuable skills and experience
• break down barriers between service users/carers and professionals
• promote decisions based on mutual and reciprocal relationships.

The Project Group was made up of members of the Involving People Group, Lay Assessors and Care Inspectorate staff (see appendix 2).
Why we need an Involvement Plan

This Involvement Plan sets out our continued commitment to involve people who have experience of using care and social work services and carers in our work.

This plan is written for anyone with an interest in the work we do, and is particularly for people who use services and their carers so that we can be held to account to show that we have achieved what we set out to achieve. It is also for our staff so that they know what the organisation expects of them.

Later in this Plan we explain how we currently involve people in our work and the commitment we have made to meaningful involvement. However this commitment is now underpinned by a legal requirement for all scrutiny bodies. The Scottish Government has issued guidance on the ‘Duty of User Focus’¹. This sets out a framework for scrutiny bodies and what Scottish Ministers expect.

The purpose of the Involvement Plan is to set out the Care Inspectorate’s commitment to fulfilling (if not exceeding) the Scottish Ministers expectations regarding the Duty of User Focus, in relation to people who use care services and their carers.

To achieve this, we will need to be an organisation that:

• thinks creatively about involving people who use scrutinised services in order that they can express their views about the services they receive and want
• is not only influenced in its day to day activities by the feedback of people who use care services and carers but works alongside them in different ways to produce the best results

¹ Public Services Reform (Scotland) Act 2010 Section 112 (1) – Guidance on Duty of user focus for listed scrutiny authorities
<table>
<thead>
<tr>
<th>Scottish Ministers expect</th>
<th>We are doing this</th>
<th>We can improve</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include people who use services/carers on the Board</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Have a forum for service users and carers to link with senior management and include in</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>corporate and strategic planning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Involve service users in the developing scrutiny activities</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Seek feedback from people who use services and their carers about the scrutiny process</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Involve service users and carers to carry out scrutiny</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Work with other scrutiny bodies to make sure that language and grading system used are</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>consistent and are therefore more easily understood by people who use the service,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>their carers and the public</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Encourage providers to seek service users’ views in developing and improving their</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Actively comply with the guidance and report on this, for example within the annual report.</td>
<td></td>
<td>✓</td>
</tr>
</tbody>
</table>
• demonstrates a model of involvement which allows involved people to be fully engaged in our work and have a choice in how they participate meaningfully
• expands upon involvement activities already in place, producing opportunities and continuing to be accessible and inclusive for all
• continues the successful recruitment and retention of involved people for strategic and operational activities
• fosters a cohesive internal approach to the involvement plan and its application
• views involvement internally as an overarching value and principle of the organisation

The Involvement Plan sets out the Care Inspectorates commitment to involvement, the corporate outcomes that involvement activities will contribute to and the actions that are necessary in order to achieve these outcomes.

Achieving these actions will allow us to become an organisation, which over time, is viewed externally as a good practice benchmark for others and has a reputation as a leader in its field for involving people.

When we consulted on this plan, people who are unable to read gave helpful feedback on how this document and in particular the Involvement Charter - the set of statement laid out later in this plan that will govern our involvement work - could be produced to make it more accessible and more meaningful to people with reading and communication difficulties. We have therefore set ourselves the action to develop these documents in a suitable format with people who have raised these issues.
The difference involvement will make

The Care Inspectorate believes that people in Scotland should experience a better quality of life as a result of accessible, excellent services that are designed and delivered to reflect their individual needs and promote their rights. This is the organisation’s vision and it contributes to achieving this vision by:

• providing assurance and protection for people who use services and their carers,
• delivering efficient and effective regulation and inspection,
• acting as a catalyst for change and innovation, and
• supporting improvement and signposting good practice.

Involving people who use services and their family carers will directly support the organisation in delivering this vision by:

• informing and influencing the way the organisation works by, and
• maintaining and improving the organisation’s focus on the needs of people who use services and their carers.

The Care Inspectorate has set itself three outcomes as part of its Corporate Plan.

**Outcome 1: Improving the quality of care and support services**

Involvement will support this by:

1.1. Involving more people who receive services during inspections to inform evaluations, develop recommendations and requirements and inform providers’ improvement and action plans so that the improvements identified are focused on the needs of people who use services.

1.2. Offering public assurance that people who use services and family carers are involved in the scrutiny of services and are looking at issues that are important to them so that it clear to the public that the needs of people who use services are at the heart of what we do.
Outcome 2: People understand the quality of the services they should expect

Involvement will support this by:

2.1. Raising public knowledge of the Care Inspectorate’s role and function through involving people in developing literature and materials about our work so that it is better understood by target audience and public assurance is enhanced as a result.

2.2. Raising people’s expectations and knowledge about the services they receive through discussing and distributing information, such as the National Care Standards and advocacy information so that people who use services and their carers are better able to make informed judgements about their care.

2.3. Raising the expectations of people who use services and their family carers of their right to be involved in the inspection of the services they receive and their right to make complaints so that they are able to contribute more easily and raise concerns where appropriate.

2.4. Making sure that involved people achieve a higher level of personal development and growth through participating in our work so that they are able to use their skills in other settings.

Outcome 3: The Care Inspectorate performs effectively and efficiently and works well with other bodies

Involvement will support this by:

3.1 Improving the quality of information we gather during inspection, for example, by helping to produce evidence gathering tools such as service user questionnaires will make information that is most relevant to the needs of service users is collected.

3.2 Improving the quality of scrutiny activity through informing the Care
Inspectorate’s policies, procedures and methods so that the Care Inspectorate remains focused on the needs of people who use services and their carers.

3.3 Enhancing the skills, knowledge and understanding of inspection staff, for example through participating in staff recruitment, training and during inspection activity so that staff have the understanding and skills to continue to put people who use services and their carers at the heart of their work.

3.4 Forming a single Involvement Team by streamlining administrative processes and offering a single point of contact or service users and their carers interested in involvement activities so that we deliver a more efficient and cost effective approach.

3.5 Contributing to the quality assurance of Care Inspectorate practice so that it remains focused on the needs of people who use services and their carers.
How people are currently involved in our work

Governance
Our Board believes that involving people who use care and support services and carers in our work is crucial. This includes involvement on the Care Inspectorates Board itself.

Whilst it is a legal requirement to involve at least two people with this experience on our Board the individuals appointed are full and equal members. In addition, all Board members have responsibility for the governance of the Care Inspectorate and for exercising leadership to promote involvement.

Involving People Group
This is a national group where people that use services and carers come together to discuss issues relating to care and support services. They also look at ways that the Care Inspectorate can improve its own activities.

We involve people in various ways through focus groups, one off events and project groups. As a result people who use services and their carers have:
  • influenced the style of our inspection reports
  • contributed to inspector training
  • informed the development of questionnaires used at inspections, and
  • supported our complaints procedure review.

Lay assessors
Lay assessors are people that use, or have used services or carers, who volunteer to take part in our care service inspections. They talk to people who use the service and their carers and make observations based on their own personal experience. This information is used by the inspector to report on the service and decide the service’s grades. The Care Inspectorate has a dedicated team that coordinates, supports and provides training to the lay assessors.
Service user/carer inspectors

Service user/carer inspectors are people who have experience of social work services. They work with Senior Inspectors carrying out scrutiny activity of local authorities. The systems for support and training vary depending on the circumstance and experience of the inspector, but generally this is provided by external support agencies. Service user/carers are paid a daily rate for their involvement.

Currently (2012) these functions are separately managed, with separate budgets. We will be bringing together these functions under the direction of one Involvement Team.

As an organisation we are committed to developing service users and carer participation and we expect all staff to play their part in embracing involvement. However involvement staff will have the lead role for supporting staff, providing training and information and taking forward the Involvement Charter promoting a culture of Involvement.
Involvement Methods

There are many ways that people who use services and carers can be involved in our work. It is important that we use the right methods for each project or piece of work. We also need to be clear with people who use care services and carers why we have chosen the methods we have.

Co-production
While developing this Involvement Plan, we used various involvement methods. We set up a project group to co-produce the plan which is a very inclusive method of involvement and the group agreed to involve other people in other ways. Therefore, we supported people to participate in reviewing the charter principles – the set of statement laid out later in this plan that will govern our involvement work - at a special event and we consulted people on the draft plan by sending copies to a wide range of people.

Informing Culture and Practice
We will make sure that our staff and people involved in our work are aware of the different methods, the benefits and the intended outcomes of these involvement methods.

Information, training and support will continue to be provided to staff and people involved in our work, to make sure that they are involved in the most appropriate way.

Delivering our business
Project and lead officers will be expected to evidence how they have considered the role and contribution people who use services and carers could make and what options there are for involvement. Project planning documents will set out how people will be involved and the intended outcomes of the project.
Involvement Plan: Developing an Involvement Charter

We looked at how the involvement culture can be developed, through involvement being a core organisational value, to staff being appraised annually on issues including their contribution to involvement to promoting involvement.

As an organisation wide responsibility, time and energy will be required to ensure that the involvement culture is developed and sustained. Leadership from the Board, Directors and senior management will be critical.

So that everyone is clear about the Care Inspectorate’s commitment to involving people and the principles we will apply, we developed an Involvement Charter. This gives a consistent message about how we will involve people in our work as detailed in this plan, and sets clear standards that we will meet.

We will promote the Charter by producing a poster which will be prominently displayed in all of the Care Inspectorate offices. This will inform the public and remind our staff about what is expected from them, as individuals, within teams and Directorates.
IN VolVEMENT CHARTER

The Care Inspectorate will:

1. Involve and support people who have or currently use services and their carers, in our activities.
2. Recognise the commitment and contribution of people we involve, and ensure that we always provide feedback so that everyone feels respected and valued.
3. Make sure that involvement opportunities we offer people make a real contribution to the work we do.
4. Offer a range of ways to be involved.
5. Welcome people from a wide range of cultures, communities, circumstances backgrounds and ages to be involved.
6. Use the skills and experiences of everyone involved practically, flexibly and creatively.
7. Be clear with people about the purpose of their involvement and how we will use their contributions.
8. Make sure that information about being involved in our work is easy to find and that our processes are open and understandable.
9. Measure, review and report on the outcomes of our involvement activities.
10. Work with other relevant organisations and agencies to develop and share good involvement practices.
Involvement — Our vision

The actions that we identified form the action plan that follows.
The action plan

By 2015 we expect that:

- our involvement work will be recognised by other agencies as an exemplar of best practice
- involved people will be empowered to constructively comment on the way the Care Inspectorate works and what it achieves, not only in relation to our involvement activities but across all aspects of the organisation’s work.
- we will have clear measures of success and therefore be able to evidence that we have an involvement culture.
- we will be working collaboratively with other regulators/improvement agencies relating to involvement activities, developments and joint working.

In order to achieve these outcomes the project group has developed an action plan for 2012-15.

By the end of 2012 we will ...

<table>
<thead>
<tr>
<th>What we will do ...</th>
<th>How we will do this ...</th>
<th>Contributing to outcome number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appoint team leader/manager and develop the Involvement Team</td>
<td>Commitment and support from the Board, relevant committees and Executive Team</td>
<td>ALL</td>
</tr>
<tr>
<td>Be aware of innovative involvement practices across Scotland and beyond and participate in relevant networks of good practice.</td>
<td>The Involvement Team and involved people will review good involvement practices and consider what other innovative practices the Care Inspectorate should adopt to complement and develop this Involvement Plan.</td>
<td>ALL</td>
</tr>
<tr>
<td>Distribute this Involvement Plan (internally and externally).</td>
<td>Once a final version is produced the plan will go onto the internet and intranet.</td>
<td>2.1 2.3</td>
</tr>
<tr>
<td>What we will do ...</td>
<td>How we will do this ...</td>
<td>Contributing to outcome number</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>Produce the Involvement Charter - in a poster format and have it displayed</td>
<td>We will set up a working group to work with the Communications Team to co-produce a poster and determine locations for display.</td>
<td>2.1 3.3</td>
</tr>
<tr>
<td>prominently.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carry out an organisation wide self evaluation/audit of involvement (how we</td>
<td>Each directorate/department will be asked to consider how they currently involve people and how they could involve people more. This will form the basis of the ‘involvement matrix’. See appendix 1 for possible involvement activities already identified as involvement opportunities and developments.</td>
<td></td>
</tr>
<tr>
<td>involve people now and how we could improve)</td>
<td></td>
<td>3.0 3.5</td>
</tr>
<tr>
<td>Participate in the development of scrutiny methods, particularly inspection of</td>
<td>Contribute to inspection methods projects to make sure that involvement of people using the services is reviewed, developed and supported.</td>
<td></td>
</tr>
<tr>
<td>social work and care services.</td>
<td></td>
<td>ALL</td>
</tr>
<tr>
<td>Produce a matrix/map of involvement opportunities and scope the models of payment/</td>
<td>The Involvement Team with people from the Involving People Group will develop an involvement matrix, setting out the range of involvement opportunities across the Care Inspectorate.</td>
<td></td>
</tr>
<tr>
<td>rewards/incentives for involvement in order to make recommendations to the</td>
<td></td>
<td>ALL</td>
</tr>
<tr>
<td>Executive Team and the Board.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>What we will do ...</td>
<td>How we will do this ...</td>
<td>Contributing to outcome number</td>
</tr>
<tr>
<td>-----------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
<td>--------------------------------</td>
</tr>
<tr>
<td>Continue to support people involved in our work and carry out a ‘skills audit’ in order that we have a data base of people’s personal experience, skills, knowledge and interests.</td>
<td>The Involvement Team will support people who want to be involved, complete ‘skills audits’ and a data base will be produced and maintained.</td>
<td>ALL</td>
</tr>
<tr>
<td>Decide on a name for people who are involved in our work – as an alternative to lay assessor/s, service user/ carer inspectors and ‘involved people’.</td>
<td>The Involvement Team and involved people will work to consider the name of ‘involved people’. Suggestions to progress this have included a holding a CI competition.</td>
<td>1.1  1.2  3.1  3.2</td>
</tr>
</tbody>
</table>

By the end of 2013 we will ...

- Based upon the outcome of the organisation wide self-evaluation / audit of involvement, we will develop a recruitment plan for involved people.
- Promote involvement through activities such as an annual Care Inspectorate ‘Involvement Day’.
- Expand the role of lay assessor area links to become ‘Involvement champions’.
- Replace the lay assessor advisory group with an Involvement Advisory Group.
- The Involvement Charter will be well known and staff will be aware that they need to evidence that they are working towards achieving the commitments.
- Link the organisation’s commitment to the Involvement Charter and employees’ performance appraisal and objectives.
• Be clear about whether we pay people for carrying out involvement activities
• Identified the incentives and rewards we will provide to involved people.
• Produce information about how to get involved in our work and this will be clear and readily available.
• Develop and implement specific user group strategies - setting out how to involve more young people, harder to reach groups of people (those who experienced homelessness, domestic abuse, drug and alcohol addictions, criminal justice services) and those from ethnic minority communities.
• Complete skills audits with people and have systems in place to support involvement in new activities across the Care Inspectorate (see appendix 1 for some of these suggested activities).
• Provide support to people who need it in a way that suits them best.
• Develop additional core involvement training for people who are involved in our work and then additional specialist areas (for example, care service inspections, local authority/integrated inspections).
• Develop and deliver more training and tools for all Care Inspectorate staff on the principles and methods of involvement.

By the end of 2014 we will:

• Have a true organisational culture of involvement.
• Carry out more work to promote the Care Inspectorate’s involvement activities through advertising and the use of social media.
• Have developed local community groups to enable more people to become involved in our work.
• Have more people from diverse backgrounds, communities and cultures working with us in ways that suit them.
• Have developed systems to monitor achievements and progress in the area of involvement and report on the outcomes annually.
Measuring Success

In our Charter, principle 9 states that we will:

‘Measure, review and report on the outcomes of our involvement activities.’

We know that it is important to review how well we are doing to achieve the Involvement Outcomes and whether we are achieving the commitments detailed in the Involvement Charter.

We will make sure that we review the outcomes and actions within the Involvement Plan on an ongoing basis and that the Involvement Plan continues to reflect changes in legislation, policy and good practice.

We already use various methods to evaluate our involvement work:
• feedback questionnaires
• internal reviews
• exit questionnaires for lay assessors when they stop working with us.

However we recognise that we need to develop a system for measuring outcomes.

We will set up a short term working group to develop processes to review, evaluation and report on the progress of this Involvement Plan and its intended outcomes. As part of this, we will seek to include the measures of involvement evaluation we develop within the Key Performance Indicators (KPIs) of the organisation as a whole and involve members of the Involving People Group in the wider KPI process.
Appendix 1: Suggested involvement activities

During the Involvement Review in 2011 we sought suggestions from Care Inspectorate staff, people who are already involved in our work and service providers, about how we could develop and improve on our involvement activities.

The activities listed below have been suggested during this process. These suggestions will be considered and debated as part of the self evaluation exercise which will be carried out in 2012. This will provide the necessary evidence to assess which suggestions should be taken forward.

Scrutiny and regulation activities

• Involvement extended to Complaints and Registration work.
• Mystery shoppers of care services.
• Role in themed/focused inspections.
• Visit more people at home – Housing Support/Care at Home.
• Helping people who use services complete the care service questionnaires.
• Making unannounced visits to care services when it’s a non inspection year.
• Verify self assessment by speaking to service users/carers.
• Developing role during inspections to interview staff and managers.
• Involvement in analysing information.
• Broaden people we engage with – parents.
• Developing focus group tools and skills at gathering information.

Communications, marketing and raising profile of work of the Care Inspectorate

• Accessible information on how to get involved in various activities.
• Use of social media – you tube, Facebook, twitter.
• Discussion forum for public and people who use services/carers.
• Go compare/travel comparison website idea – for care services.
• Easy read policies, procedures and codes of conduct available.
• Leave/deliver information about the role of the Care Inspectorate and how to get involved to care services.
• Have a Care Inspectorate publications bus.
• Feature on a Scottish TV show – River City to increase CI profile.

**Policies, procedures and other involvement activities**

• Influence and inform policy development.
• Advice on language, design and ease of interpretation of publications.
• Service user/carer panel – to advice on issues such as QA of reports.
• Assessing how well policies, procedures and systems are complied with (QA).
• Recruitment of Care Inspectorate staff.
• Participation In Care Inspectorate staffs induction and ongoing training.
Appendix 2: Project group membership

We would like to thank the people who wrote this plan for their time, commitment, energy, patience and valuable contributions.

The Project Group was made up of:

Barbara Barnes  Lay Assessor  
Helen Biggins  Lay Assessor and Involving People Group member  
Heather Dall  Development Officer, Care Inspectorate  
Martin Fraser  Involving People Group member  
Charlene Guild  Professional Adviser (Equalities and Engagement) Care Inspectorate  
Jo Harris  Senior Inspector, Care Inspectorate  
Wilma Morgan  Inspector Manager, Care Inspectorate  
Norman Wallace  Involving People Group member  
Winnie Whyte  Involving People Group member and Lay Assessor  
Barbara Mitchell  Admin Support

We would also like to thank people who attended meetings and to those of you who took the opportunity and made time to comment on the plan for your input, suggestions and comments. We hope you can see how your contributions have influenced this plan.

We would also like to thank Catriona Ness from NHS Tayside and Gerry Power JIT, Scottish Government for their input on ‘co-production’ and to staff from Quarriers for their enjoyable session on developing the PATH.
## Appendix 3: Consultation

### Consultation – Involvement Plan

<table>
<thead>
<tr>
<th>Opportunities to submit comments and suggestions</th>
<th>Care Inspectorate - reference group</th>
</tr>
</thead>
<tbody>
<tr>
<td>The reference group were contacted on two occasions</td>
<td>Communications</td>
</tr>
<tr>
<td>* To comment on the Charter and how the Care Inspectorate could promote an Involvement culture</td>
<td>Intelligence</td>
</tr>
<tr>
<td>* On the Draft Involvement Plan</td>
<td>Health Team</td>
</tr>
<tr>
<td></td>
<td>Finance</td>
</tr>
<tr>
<td></td>
<td>ED</td>
</tr>
<tr>
<td></td>
<td>IPMs all areas</td>
</tr>
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<td>Complaints National team and QA</td>
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<td>Senior Inspectors (ex SWIA)</td>
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| Care Inspectorate | All staff - intranet news today |

### Communication

- Intelligence
- Health Team
- Finance
- ED
- IPMs all areas
- Complaints National team and QA
- Registration National Team
- Lay Assessor team
- Senior Inspectors (ex SWIA)

### Invitation to participate in meeting to contribute to Involvement discussions and develop the Charter – 15 March 2012

| Internal | Lay Assessors |
| Internal | IPG members |
| External | Who Cares? |
| External | Young People Inspectors |

### Invitation to attend meeting facilitated by IPG members to discuss Draft Involvement Plan – 26 April 2012

| Internal | IPG members |

### Opportunity to comment on Draft Involvement Plan

| Invitation to consultation meeting - 30 April 2012 (or submit written responses) | External | Who Cares? |
|---------------------------------------------------------------------------------|-----------------|
|                                                                                | External | People First |
|                                                                                | External | Move on |
|                                                                                | External | Carers Scotland |

### Others who were given opportunity to make comment/suggestions

| Internal | Executive Team |
| External | Co-production trainers (NHS Tayside, JIT) |
| External | PATH leaders |
Appendix 4: Co-production summary of process

To support our approach to co-production, it was important to have the right balance of professionals and people who use care services and carers. A short term project group was set up with key employees and currently involved people, the majority of the group being made up of people who use care services and carers. The membership of the project group is detailed in Appendix 2.

As the work was originally to be completed within a short timescale, we acknowledged that we may not always have all members present at our meetings but we ensured that we always had seven members as a minimum, with a balance of professionals and involved people, before going ahead. It was agreed that the strategy work would be broken down into four separate sessions on a weekly basis, throughout February.

Session 1
The first session focused on the method of co-production as it was important that the group agreed this was the best way forward for the project. Gerry Power from the Scottish Government’s Joint Improvement Team and Catriona Ness, NHS Tayside led the session on co-production methods and principles, how it can work in practice through real life case studies and how we could successfully apply this to our Involvement Strategy project.

At the end of the training session the group developed contact setting out any rules for the group what individual’s commitment and contribution to the Project would be. Including attendance at meetings, leading on pieces of work and consulting with stakeholders.

The Project group also agreed the project plan and a series of meetings to take this work forward.

Sessions 2 and 3
Two sessions were required to develop the Involvement Charter the organisation could commit to. These sessions were particularly challenging as group members felt these aims and objectives were the cornerstone of the strategy and as a result, they had to be clear and transparent in tone, language, message and intent. A clear consensus was reached resulting in
the draft Care Inspectorate Involvement Charter contained within the draft Plan.

Session 4
This session concentrated on what we wanted Involvement to achieve, the vision for involvement within the Care Inspectorate and how this would be taken forward. To carry this exercise out, Quarriers Community Connections Team facilitated the session to produce a PATH. They define the PATH process as helping a group to envision the future they want and then consider how they will support the vision to make it happen. The information gathered from the PATH session – The vision, the outcomes and actions required are detailed with the Involvement Plan.

Session 5
This session was used to draw together suggestions and ideas gathered from an event held with IPG members, lay assessors and Who Cares? (15 March) and as a result of this feedback amendments to the plan were made. The project group spent more time considering the Outcomes of involvement and how these link to the corporate plan and could be evidenced.

The group members also committed to consulting with their people they had contact with, internally and externally. Methods of doing this and timescales were agreed.

Session 7
Following the consultation period members collated the comments and suggestions they had received from their constituents and fed this back to the group. Issues were discussed and where there was agreement, amendments were made.

The group discussed the attendance at the Board meeting on 14 June and how the Involvement Plan should be presented. Various people expressed anxiety about delivering a presentation, options such as writing a poem or acting a scene were explored as alternatives. It was suggested by a few members that it would be better if a pre-recorded presentation was made or actor involved (suggestions given) and that this could be used as promotional material as well as for Board and Project group members would happily attend and answer any questions about the plan and the co-production process.
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