



Monitoring our Performance Q1 2012-13

Report to: Strategy and Performance Committee

Date: 28 August 2012

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Report No: SP-10-2012

Agenda Item: 5

PURPOSE OF REPORT

To present the Q1 2012-13 summary report on performance

RECOMMENDATIONS

That the Strategy and Performance Committee:

1. Notes and considers the performance against the interim KPIs for the Care Inspectorate.

Version Control and Consultation Recording Form

Version	Consultation	Manager	Brief Description of Changes	Date
	Senior Management		All members ET and other lead officers were consulted.	9/08/12
	Legal Services			
	Resources Directorate			
5.0	Strategy and Performance Committee			28/08/12
	Partnership Forum Consultation (where appropriate)			

Equality Impact Assessment

To be completed when submitting a new or updated policy (guidance, practice or procedure) for approval.

Policy Title:	NA	
Date of Initial Assessment:	NA	
EIA Carried Out	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
If yes, please attach the accompanying EIA and briefly outline the equality and diversity implications of this policy.		
If no, you are confirming that this policy will have no negative impact on people with a protected characteristic and a full Equality Impact Assessment is not required.	Name: Ingrid Gilray Position: Policy and Research Officer	
Authorised by Director	Name: Karen Anderson	Date: 02 August 2012

1.0 INTRODUCTION

This paper presents a summary report of performance against the interim KPIs contained in the Care Inspectorate Corporate Plan 2011-14.

The Care Inspectorate Audit Committee agreed in August 2011 to implement initial baseline key performance indicators to measure progress during 2012/13 which are contained as performance measures within this report.

Further work has been agreed by the Audit Committee to establish a range of new performance and quality indicators to evidence our performance and delivery of corporate objectives in 2013/14.

2.0 SUMMARY OF PERFORMANCE Q1 2012/13

2.1 Outcome 1: The quality of services in Scotland is improving

2.1.1 Summary of progress and main achievements

2.1.1.1 Children's services joint inspections

Lessons from the development site have been considered and relevant changes are being made. For example, we are exploring the ways in which we can further utilise the intelligence from the inspection of care services to inform the scope of the joint inspections. In order to have access to the most recent information, scheduling of care service inspections prior to the joint inspection is being arranged. We are also further defining the roles and responsibilities of each staff member directly involved in the joint inspection. We are also ensuring that efficiencies are evidenced by reducing on-site scrutiny activity from approximately 20 days to 13 days.

Additional work is being undertaken to ensure the Quality Indicator framework used to assess the quality of care and effective multi-agency working is robust, open to challenge and dynamic and flexible to evidence the quality of outcomes for children and young people. This framework will be available for consultation with partners in October 2012.

Development days for all staff involved in the forthcoming inspections have been organised in September and January next year. In addition, an inspection manager involved in the joint inspections will devote part of her time, with support from Employee Development (ED), to develop a programme of specific guidance and training for all staff to ensure the successful implementation of joint inspections in the future.

We have been working with the Scottish Government lead for Getting it right for every child (GIRFEC) to deliver training to all staff across the country. Feedback to date has been very positive. In addition, all staff can now sign up to be part of an online discussion forum, the Knowledge Hub, where members

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can share updates on GIRFEC resources and examples of practice.

2.1.1.2 Structure Review

We completed the Organisational Structure Review and this was presented to the Resources Committee on 19 June 2012 for full consideration. The process has been far-reaching and inclusive and staff and other key stakeholders have been given the opportunity to inform the Review process. Feedback about the consultation process itself has been positive.

During April and May 2012 many staff contributed to the consultation in a number of different ways, including individual meetings, focus groups and ideas and comments via a 'suggestion box' on e-mail.

In total there were:

- 19 one-to-one meetings
- 6 visits to areas (including some video conferencing)
- 17 focus groups
- 44 sub groups
- 957 comments
- 42 emails

Whilst recognising the achievements of the Care Inspectorate in its first year, there was clear and overwhelming support for decisive structural change.

On 3 July 2012, the Chief Executive shared the summary report with all staff and detailed the next steps regarding the publication of the new structure, via a communication on the intranet.

On 10 July 2012, there were detailed discussions with the Board. On the same day, the Chief Executive met with senior managers and with Partnership Forum to discuss implications for staff and the anticipated timing of changes.

2.1.1.3 Intelligence and Risk frameworks

The Board on 14 June 2012 signed off both the Intelligence and Risk frameworks and approved 14 priority key deliverables for the first year of the action plan. The first meetings of the revised and streamlined intelligence and risk project group have taken place. The key deliverables have all been assigned lead officers and work plans for all 14 deliverables are in place. Quarterly reporting arrangements are in place to Executive Team (ET) and to Strategy and Performance Committee.

The internal self-evaluation exercise, which focused on taking a closer look at risk has been completed and was submitted to ET on 12 July 2012. It sets out improvement actions that were commonly identified by staff across participating teams. Many of these have been incorporated into existing work streams. Other improvement actions will be addressed through the strategic

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structure review or may require other management agreement and action.

2.1.2 Inspections and inspection findings

2.1.2.1 Care service inspections

In Q1, we focussed on inspecting poorly performing services. Between 1 April and 30 June 2012, we have completed 84% of the 1,867 inspections that we planned to do. We have started 1,684 inspections in Q1 and 1,563 of these inspections were completed in Q1, while 121 of these inspections were completed in the beginning of Q2. This happens when the visit or multiple visits were carried out towards the end of Q1 and the feedback to the service was given at the start of Q2. Therefore, 90% of scheduled inspections have been started in Q1 and have been completed by 31 July 2012. This reflects our focus on poorly performing services in Q1 where inspections can require several visits and the final feedback might happen at a later date after the visits have been carried out. For some inspections, the completion date might not have been recorded yet even though the inspection has been finished. Inspection programme managers are working with inspection managers and administration officers to explore again not only how we emphasise to inspectors the importance of accurate and timeous recording, but also what administration support we can provide to inspectors to support this.

Our inspection targets are revised at the end of each quarter to reflect the most up-to-date planned inspections and to remove those services that cancelled throughout the year and were no longer registered with the Care Inspectorate at 30 June 2012. Our inspection planning is flexible to enable us to react to changes in risk assessments and performance of services as well as cancellations and services changing between being active and inactive, the number of inspections planned constantly changes throughout the year. Based on these changes to the planning and after removing the cancelled services of the target we had planned to carry out 1,867 inspections.

As part of the previous inspection planning regime, Q1 and Q2 inspection planning includes over-planning of childminding inspections which skew inspection targets. The reason for over-planning is to ensure that inspectors have flexibility to change which service to inspect for example, should a childminder or housing support service staff not be available at the point of unannounced inspection visit inspectors can undertake unannounced inspection of other services therefore effectively using inspection time. This issue will be resolved on introduction of new national inspection planning methodologies.

The new national model of inspection planning will include caseload allocation at localised level every inspection quarter. The caseload allocation will be more accurate based on information on time required for inspection from an ongoing diary exercise. It will also be enhanced by more efficient procedures currently being extrapolated from an inspection process mapping exercise. In

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addition to better workload and workforce planning, time will be built in and allocated for report writing as soon as inspection is completed. Each of these activities will contribute to more accurate planning assumptions and remove the need for over-planning.

Some offices highlighted the fact that inspection planned dates might not in all instances be up-to-date, especially where services change their status from being active to inactive or to proposing to cancel. Additionally, the Intelligence team can assist offices with data cleaning of inspection dates and inspection scheduled dates.

A total of 971 care service inspections were carried out as unannounced inspections, which is 62% of all inspections. 519 inspections (33%) were made at short notice and 64 inspections were announced inspections (4%) (for differing reasons, such as joint inspections with HMIE and some services where inspectors had to make sure officers were present). 79% of the 'short notice' inspections were inspections of childminders, where we need to make sure that the childminder and children are available at the planned inspection date. Another 17% of short notice inspections were carried out in Housing Support or Care at Home services where office staff are not always present.

Five care service inspections, 0.3% of the total 1,563 inspections completed, were unscheduled additional inspections based on risk and intelligence. This figure does not reflect additional follow-up visits necessary as a result of enforcement or to evidence improvement. We are devising a recording tool to capture additional inspections, follow-up visits, co-working and additional regulatory activity which is not recorded within existing systems or the diary exercise.

Our target is to inspect 9,806 care services in 2012/13 (based on WMT at 1 August 2012). This target includes services which we might not have to inspect, for example, inactive services that remain inactive, and services which may end up cancelling. We are on target to complete all planned inspections.

2.1.2.2 New approaches to inspection planning

- An Operational Steering Group, chaired by the Director of Operations (Planning, Assurance and Public Reporting (PAPR)) has been created to lead on inspection planning and other key related operational work streams, including workforce planning and development of inspection methodology. The steering group will have clear lines of accountability, responsibility, decision making and communication. Membership reflects all operational functions and includes Partnership representation.
- An Inspection Coordination Team, responsible for inspection planning in the future, will report directly to the steering group. The team is in the process of agreeing membership and terms of reference.

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- An inspection process mapping event took place on 20 June 2012, involving inspector managers, inspectors, administrative staff and department managers. This initial exercise provided valuable information on current inspection processes. A follow up event in September 2012 will look in more detail at process improvement in order to identify where we can work more efficient and effectively.

2.1.2.3 Child Protection inspections

The final two Child Protection Inspection reports were published on 17 May 2012 and 14 June 2012. This completes the second round of child protection inspection reports.

2.1.2.4 Initial Scrutiny Level Assessments (ISLAs) and follow up scrutiny

Between 1 April and 30 June 2012, scrutiny reports were published for three local authorities.

We continue to involve people who use services and their carers in 100% of scrutiny sessions.

We have commenced ISLAs and follow-up scrutiny of the last four of the 32 local authorities in Scotland in the first quarter 2012. They are on track for completion in Summer 2012.

2.1.3 Registrations

At 30 June 2012, there were 14,366 registered care services. This is a slight increase of 0.25% from the 14,328 services at 31 March 2012.

By 30 June 2012 we had completed 248 new registrations, 184 (74%) of which were childminders and 64 (26%) were other service types.

We have dealt efficiently with registrations, exceeding our target of 80% as follows:

- 89% of childminding registrations completed within three months
- 92% of registrations of other service types completed within six months

We did not achieve 100% completion of registrations and or variations due to a number of factors such as: awaiting further information from providers; awaiting provider fitness references; and, internal issues such as staff absence as well as the need to move staff between inspection, complaints and registration teams to address skills gaps.

During the first quarter to 30 June 2012 182 registered services cancelled their registration. This is of a similar level as in Q1 2011/12 when 199 services cancelled their registration.

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In addition to registering and cancelling services, we make variations to their conditions of registration. The volume of work associated with variations depends on their nature and complexity. By June 2012, we had received 882 variations. 320 of the 882 variations received have been completed in Q1. 496 were in progress and 66 had been withdrawn. In total, we completed 677 variations in Q1 (274 childminder variations and 403 variations from other service types). This number includes variations that we received before April 2012 but were completed between 1 April and 30 June 2012. Of all variations completed, 80% of childminder variations and 70% of other service type variations had been completed within three months, an internal target set by the registration team in October 2011. It matches the three months' notice required for variation applications by providers as specified in SSI 2002 No 29 Regulation 4(2).

Reasons for not completing variations within three months include delays in applicants or other agencies providing information to the Care Inspectorate as well as internal competing priorities. As completion of variations is not currently a key performance indicator and the completion rates are not included in the monthly performance report, our systems for monitoring variation performance are not as sophisticated as for other regulatory activities, therefore, it proves more difficult to provide a detailed break down of reasons without further investigation. At 30 June 2012, 1093 variations remained still in progress.

Further instability in the care home market has resulted in the national registration team continuing to respond to urgent and high profile cases. For example, two care home providers were recently subject to compulsory liquidation (Spencer Care Ltd) and administration (Doson Ltd) and we have fulfilled an important safeguarding role by checking and giving assurance that the management of the care homes concerned was satisfactory during the transition period.

As well as these urgent cases, we have continued to receive a high number of registration applications for care homes changing hands or internal restructuring of holding companies. For example, during Q1 applications for care homes showed an increase from the same period last year while applications for other service types have decreased.

The registration and variation function plays an important role in protecting service users from unsuitable new services or changes to existing services and setting the benchmark of acceptable standards of care. Compared to the Care Commission, the rate of refusals of applications has increased. The Care Inspectorate has strengthened some aspects of our registration and variation checks, such as carrying out more site visits for takeovers and variations and reintroducing GP checks for childminding registrations. It also reflects more consistent practice and the national team being able to establish a national benchmark, such as the maximum numbers of children for which

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childminders and nursery playrooms are registered. Other examples of refusals resulting from the consistent application of standards include the minimum number of toilets in children's day care service and environmental standards for dementia and respite care.

2.1.4 Complaints

We received 817 complaints between 1 April and 30 June 2012, which is an increase of 16% on the 688 complaints the Care Inspectorate received over the same period last year. We formally registered 522 complaints, and completed 471 complaints between April and June 2012. This includes complaints, which the Care Inspectorate received before 1 April 2012 and which were completed by the Care Inspectorate in 2012/13.

We dealt efficiently with complaints: as at 30 June 2012 98% of complaints were acknowledged within three days and 99.6% of investigations were completed within 28 days or the complainant notified of an extension to the timescale. Some cases change from the complainant wanting to be anonymous (no acknowledgement required) to the complainant providing contact details later than three days after the complaint was received.

We received 11 complaints against the Care Inspectorate between 1 April and 30 June 2012, one of which was completed, two were withdrawn and eight remain in progress. This is in comparison to the ten complaints received against the Care Inspectorate in Q1 2011/12.

We have completed five complaints against the Care Inspectorate since 1 April 2012; none of which was upheld. This includes complaints received before 1 April 2012.

The Complaints Sub-committee dealt with one review of an investigation of a complaint. The Complaints Sub-committee agreed that the outcome of the investigation was based on all of the available evidence and was reasonable in the circumstances.

We have completed proposals for revising the Care Inspectorates complaints procedures and these have been presented to and discussed by ET, the Complaints Sub Committee in April 2012, the Strategy and Performance Committee in May 2012, and in June 2012 the Board approved the revised Care Inspectorate complaints process. Work is now underway on implementing the agreed changes.

In addition, a draft revision of the complaints process against the Care Inspectorate is now out for consultation.

A group set up to examine and improve the way the Care Inspectorate progresses incidents at work vis-a-vis conducting complaint investigations will report shortly.

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2.1.5 Other scrutiny activity

2.1.5.1 Enforcements

The number of enforcement notices that we issued in Q1 2012/13 is summarised by area in the table below. The Care Inspectorate issued 21 non-technical enforcements in Q1 2012/13. We are currently refining the methodology to capture information on compliance with enforcements and we will report on this in future performance reports. We will provide Board members with headline information on the outcome of these enforcement notices ie did services demonstrate improvement.

Non-Technical enforcements Q1 2012/13

(Note: this table excludes ‘technical’ enforcements which are not related to the quality of the service.)

Area	Number of Notices 1 April – 30 June 2012	Total Number of Services
Central & West	4	4
East	5	5
North	4	4
South	8	7
Scotland	21	20

3.0 OUTCOME 2: PEOPLE UNDERSTAND THE QUALITY OF SERVICE THEY SHOULD EXPECT AND HAVE A GOOD EXPERIENCE OF SERVICES CENTRED ON THEIR NEEDS, RIGHTS AND RISKS

Summary of Q1 progress and main achievements

3.1 Involvement Plan

The Involvement Plan - "involving people, improving services" was presented to the Board on 22 June 2012 and was approved for implementation. The group of people that co-produced the plan were made up from Care Inspectorate staff, people who are Involving People Group members and lay assessors. Work has commenced on implementing the action plan for Year 1. Recruitment of appropriate resources has also commenced and maternity leave cover for the Professional Adviser (Involvement and Equalities) has been arranged.

3.2 National Enquiry Line

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The National Enquiry Line received 6,675 calls between 1 April and 30 June 2012. The calls were split as follows:

Category	Number of calls received 1 April – 30 June 2012
Complaints/Concerns	1074
Registrations	1405
E-forms/website	730
Registered services	427
All other enquiries	3039
Total	6675

Calls in the category 'other enquiries' are, for example, concerned with staff and office details, finance, Information Governance, publications, disclosure enquiries, SSSC and qualifications, National Care Standards, services in England, contact details for services, necessary insurances or callers looking for other organisations.

3.3 Grading

50% of all care services graded at 30 June 2012 had received a grade 5 or 6 for Involving People quality statements. It is noted that 20% of graded services achieved a grade of 5 or 6 for Involving People information statements. Further information will be provided to members in future performance reports via analysis of the evidence and impact of recent investments in user focus time as part of the inspection process. This information will be reported upon following completion of Q4 2012/13 performance.

Half of all care services inspected by 30 June 2012 demonstrated very good or excellent quality practices in involving people who use care services in the delivery of the service. Overall 99% of services graded against Involving People statements received grades of 3 or more for all statements. Further information will be provided to members via future performance reports to identify across private, voluntary and local authority providers.

Overall, 4.4% of graded care services have grades of 3 or less for all quality themes assessed by 30 June 2012, this compares to 3.8% of graded services by 30 June 2011. We continue to work with these services to drive up improvements and will not hesitate to take enforcement action where this is required. The majority of these services are Childminders, Care Homes and Day Care of Children Services. The increased level of graded services that have grades of 3 or less for all applicable quality themes can be seen as a result of the changed methodology. The new methodology covers four

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themes (where applicable) when previously only two themes were inspected for low and medium risk services. 81% of services with all grades of 3 or less are services in the private sector. 11% are voluntary or not for profit services and 8% are local authority services.

3.4 Satisfaction with care services

We analysed questionnaires from 711 services in Q1. The Care Standards Questionnaires are completed by people who use services and their relatives and carers. In Q1, 90% of care services had 90% or more respondents who were satisfied or very satisfied with the overall quality of service. This compares to 95% of care services that had 90% or more respondents who were satisfied or very satisfied with the overall quality of service in Q1 2011/12. We will provide more in depth analysis in the next quarterly report of how the figures compare between care service types.

We are currently developing new care service questionnaires and are looking at new ways to gather information using an online tool.

3.5 Publication of inspection reports

Of the 1,501 draft care service inspection reports issued between 1 April and 30 June 2012, 81% were issued within 20 working days, compared to 85% in Q1 2011/12. The 19% of draft care service inspection reports not issued within timescale were due to protracted negotiation with providers and staff absence.

A total of 1,039 care service inspection reports were finalised between 1 April and 30 June 2012. 97% of final inspection reports were published within 13 weeks. The additional 3% were delays due to awaiting provider feedback and staff absence. This is compared to 97% is the same percentage of final reports published within the deadline in the first quarter 2011/12.

All final Child Protection Inspection reports were published within the 14-week target.

Between 1 April and 30 June 2012, scrutiny reports were published for three local authorities. One of these was published within the prescribed timescales. Two reports were published with delay due to a delay in finalising the findings with the local authority. A further two reports that were planned to be published in Q1 are delayed due to the election period, difficulties in setting up focus groups and annual leave. They will now be published in August 2012.

4.0 OUTCOME 3: CARE INSPECTORATE PERFORMS EFFECTIVELY AND EFFICIENTLY AS AN INDEPENDENT , SCRUTINY AND IMPROVEMENT BODY AND WORKS WELL IN PARTNERSHIP WITH OTHER BODIES

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Summary of Q1 progress and main achievements

4.1 Workforce planning

There has been some initial analysis of Diary Exercise data but it has been agreed that further data was required in order to fully capture the information needed to inform decision making. Therefore, the diary exercise will continue. Work is underway to ensure we capture all related inspection activity and initial analysis to inform workforce planning for 2013/14 and beyond will be undertaken between September and December 2012. This combined with the inspection process mapping results will enable more accurate and efficient deployment resources as part of national inspection planning.

4.2 Quality assurance

A draft Quality Assurance plan for the Care Inspectorate has been developed. Priority work on improving the quality of inspection reports is being taken forward by operational teams, supported by the practice learning assessors and Employee Development. The Inspection Report Writing procedure has recently been updated. Appropriate links are being made to the associated work being taken forward by the intelligence and risk project team.

4.3 Public reporting

- During Q1 of 2012, we received 41 Freedom of Information requests. There are seven requests still in progress because clarification about the information requested is required. Of the 34 responded to all were completed within the statutory time period of 20 working days.
- We received 19 Data Protection requests in Q1, and responded to 13 of these within the 40-day deadline. Six requests are in progress as we are awaiting identification or clarification on information being sought.
- We received 27 Parliamentary questions in Q1 and we responded to 21 of these. Six requests are still in progress.
- We received 31 requests from the Scottish Government Sponsorship Branch. 18 were responded to and 13 are still in progress.

4.4 People are confident that scrutiny improves the service

The Care Inspectorate continues to use Inspection Satisfaction Questionnaires to assess the quality of care service inspections. This is measured as the satisfaction of care service staff and service users with the inspection and whether they think the service quality will improve following inspection. In Q1 2012/13 94% of staff and 75% of service users think that the quality of their care service will improve following the inspection. Although it is important to us that our inspections give people some assurance that things will improve, we are also considering how we can follow this up to see

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whether or not improvements were then observed. This development work is planned for 2013/14.

4.5 Involvement of people who use services and carers

68 out of 1563 (4.4%) care service inspections involved one or more lay assessors during Q1 2012/13. This compares to 86 out of 1707 (5%) inspections involving lay assessors in the first quarter 2011/12 and shows that there is a slight drop in proportion as well as absolute numbers of lay assessor inspections. As part of a shift in methodology lay assessors are increasingly being asked for their involvement in large inspections of a number of dispersed housing support or sheltered housing units that can for example involve seven 'site visits' in different geographies. The Lay Assessor team have started recording the time they spend on a single inspection. Additionally some lay assessors left at the end of 2011/12 and at the start of the first quarter of this year. More lay assessors were recruited but they have not been active immediately as there have been Protecting Vulnerable Groups check delays and some delays in organising shadow inspections which require a member of the Lay Assessor team to attend with the lay assessor to assess performance.

As part of the recently approved Involvement Plan we are currently recruiting two lay co-ordinators so that we can undertake a national recruitment campaign to significantly increase the number of lay assessors we have available to undertake inspection. We will report progress on our Involvement plan to Board members in Q4 2012/13.

During every ISLA, service users and carers are consulted and are also part of the ISLA inspection teams.

4.6 Involvement in care home working groups

Together with other organisations and representatives from the care home sector we are actively involved in the following working groups:

- Managing falls and fractures in care homes for older people - good practice self-assessment resource
- Scottish Active Ageing work/ Go For Gold - care homes
- Development of Allied Health Professionals practice placements in care home settings
- Activity provision - benchmarking good practice in care homes
- Activity resource for care settings
- Telerehabilitation
- Personal foot care working group

4.7 Variance from planned budget

No budget monitoring is done in the first quarter. This will be completed in late July 2012 following reviews of the first budget monitoring exercise.

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4.8 Absence reporting

For the period between 1 April and 30 June 2012 the overall percentage of sickness absence was 4.4%, 1.7% was short-term sickness and 2.7% was long-term sickness. The Chartered Institute of Personnel and Development (CIPD) reported that the average absence rate for the public sector for 2011 was 4.0%.

4.9 Pay Remit 2012/13

Following approval in principle from the Scottish Government and a consultation process with the trade unions the pay remit for 2012/13 was agreed in June 2012. The Pay Award is consistent with the Public Sector Pay Policy for 2012/13, is applicable from 1 April 2012 and will be paid in the July 2012 salary.

4.10 Carbon Management

The Care Inspectorate has completed a carbon management plan as part of its environment agenda. The Carbon Trust recognised this work by presenting the organisation with a "Cutting Carbon Emissions" Award in recognition of the effort in the field of carbon management, emission reduction and the mitigation of climate change during 2012. The environment agenda will further develop with an environmental strategy and campaigns to reduce the Care Inspectorate's carbon footprint.

5 SUMMARY OF PERFORMANCE AGAINST KPIS Q1 2012/13

Unless otherwise indicated, all figures are cumulative totals for the year

Key Performance Indicator 2012/13	Target	Q1 2012/13	Q1 2011/12	Q2 2012/13	Q3 2012/13	Notes																								
KPI 1: % of regulated care services with grades of 3 or less for every graded quality theme	To be established	4.4% of graded services have grades of 3 or less for every quality theme	3.8% of graded services have grades of 3 or less for every quality theme			Of 7,560 registered and graded care services (other than childminders) 323 services (4.3%) have grades of 3 or less for all quality themes. Of 5,337 registered and graded childminders 243 services (4.6%) have grades of 3 or less for all applicable quality themes.																								
KPI 2: % of inspections completed against planned number of inspections	To be established	1,563 care service inspections completed in Q1 (84% of target for Q1) 1,684 care service inspections were started in Q1 and completed before 31 July 2012 (90% of	In Q1 2011/12 we completed 1,707 inspections. At this time, no target for completion of inspection had been set due to changes in the WMT, caseloads and teams.			Inspections started in Q1 and completed in Q1 against target for Q1 <table border="1"> <thead> <tr> <th></th> <th>completed</th> <th>target</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>Central & West</td> <td>407</td> <td>467</td> <td>87%</td> </tr> <tr> <td>East</td> <td>562</td> <td>678</td> <td>83%</td> </tr> <tr> <td>North</td> <td>325</td> <td>394</td> <td>82%</td> </tr> <tr> <td>South</td> <td>269</td> <td>327</td> <td>82%</td> </tr> <tr> <td>Total</td> <td>1,563</td> <td>1,867</td> <td>84%</td> </tr> </tbody> </table>		completed	target	%	Central & West	407	467	87%	East	562	678	83%	North	325	394	82%	South	269	327	82%	Total	1,563	1,867	84%
	completed	target	%																											
Central & West	407	467	87%																											
East	562	678	83%																											
North	325	394	82%																											
South	269	327	82%																											
Total	1,563	1,867	84%																											

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Key Performance Indicator 2012/13	Target	Q1 2012/13	Q1 2011/12	Q2 2012/13	Q3 2012/13	Notes
KPI 5: % of requirements in 2011/12 that were met in 2012/13	Monitor trend					Update in Q4
KPI 6: % of LA receiving positive reports for Child Protection Inspections	To be established	100% (Two inspections completed)				
KPI 7: % of local authorities receiving minimum number of scrutiny sessions following ISLA		22%				23 Local authorities have their ISLA level assessed so far. Five of these were assessed as level 1 scrutiny. (This indicator is to be revised)

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Key Performance Indicator 2012/13	Target	Q1 2012/13	Q1 2011/12	Q2 2012/13	Q3 2012/13	Notes												
<p>KPI 8: % services with greater than 90% of respondents happy or very happy with the overall quality of the service they receive</p>	Monitor trend	90% (n = 711)	95% (n = 675)			In Q1 2012/13, 90% of care services had 90% or more respondents who were satisfied or very satisfied with the overall quality of service.												
<p>KPI 9: % of services with 5/6 grades for involving people quality statements</p>	Monitor trend	50% over all themes	50% over all themes			<p>KPI 9: % of services that received a 5 or 6 grade for quality statement Involving People</p> <table border="1"> <tr> <td>Care & Support</td> <td>65%</td> </tr> <tr> <td>Environment</td> <td>58%</td> </tr> <tr> <td>Staffing</td> <td>55%</td> </tr> <tr> <td>Management & Leadership</td> <td>47%</td> </tr> <tr> <td>Information</td> <td>20%</td> </tr> <tr> <td>Over all themes</td> <td>50%</td> </tr> </table>	Care & Support	65%	Environment	58%	Staffing	55%	Management & Leadership	47%	Information	20%	Over all themes	50%
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Key Performance Indicator 2012/13	Target	Q1 2012/13	Q1 2011/12	Q2 2012/13	Q3 2012/13	Notes
KPI 10: % of child protection and local authority reports that identify positive multi-agency working		New KPI				
KPI 11: % of final regulated care service and child protection inspection reports and ISLA scrutiny reports published within specific timescales	Target % to be set 13 weeks for care services, 14 weeks for CP2 inspections	Draft care service inspection reports (20 days):81% Final care service inspection reports (13 weeks): 97% Final CP2 inspection reports (14 weeks): 100% Three local authority	Draft care service inspection reports (20 days):85% Final care service inspection reports (13 weeks): 97%			1,501 draft care service inspection reports issued 1,039 final care service inspection reports published Two final CP2 inspection reports published Three local authority scrutiny reports published

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KPI 12: % of people who use services and their carers who are confident that scrutiny improves the service	Monitor trend	Staff 94% (n = 109) Service users 75% (n = 52)	Staff 95% (n = 87) Service users 89% (n = 19)		scrutiny reports published in Q1, two of these published with a delay			
KPI 13: % of inspections/scrutiny sessions that involve people who use services and their carers		68 care service inspections (4.4%) involved Lay Assessors 100% of scrutiny sessions involved people and their carers.	This was not reported on in Q1 2011/12					This information only covers care service inspections

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Key Performance Indicator 2012/13	Target	Q1 2012/13	Q1 2011/12	Q2 2012/13	Q3 2012/13	Notes
KPI 14: % of staff sickness absence	To be established	4.4%	3.45%			1.7% was short-term absence and 2.7% was long-term absence.
KPI 15: % of efficiency savings achieved	To be established					The efficiencies report is being developed and will be reviewed by ET in August 2012 and will be reported to the Resources Committee in September 2012
KPI 16: % of variance from planned budget	+/- 2%					This will be completed in late July 2012 following reviews of the first budget monitoring exercise.
KPI 17: Composite measure: % of registration and complaints activities completed within specific timescales (complaints acknowledged within 3 days; complaints	Not yet agreed	Complaints acknowledged in three days: 98% (n = 374) complaints completed within 28 days: 99.6% (n = 469) CM registered	Complaints acknowledged in three days: 97% (n = 302) complaints completed within 28 days: 98% (n = 328) CM registered			Further work to be undertaken on the potential to combine this into one measure.

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<p>completed within 28 days; registrations completed within 3 months for childminders and 6 months for other care services)</p>		<p>within three months: 89% (n= 184) Other services registered within three months: 92% (n= 64)</p>	<p>within three months: 79% (n= 142) Other services registered within three months: 84% (n= 77)</p>		
<p>KPI 18: Memorandum of Understanding agreements in place with relevant bodies and measures identified to review their efficiency in practice</p>	<p>New KPI</p>	<p>Will be reported in Q2</p>			

6.0 RESOURCE IMPLICATIONS

There are no additional resource implications arising from this report.

7.0 BENEFITS FOR PEOPLE WHO USE SERVICES AND THEIR CARERS

This report relates to the monitoring of performance against the Care Inspectorate Corporate Plan 2011-14 that has clearly stated benefits for people who use care service and their carers.