



Minutes

Meeting: Strategy and Performance Committee
Date: 13 March 2012
Time: 10.30 am
Venue: Rooms 0.18 & 0.24, Compass House, Dundee

Present: Frank Clark, Chair (Convener of Committee)
 Theresa Allison
 Anne Haddow
 Douglas Hutchens
 Cecil Meiklejohn
 David Wiseman

In Attendance: Annette Bruton, Chief Executive
 Karen Anderson, Director of Operations
 David Cumming, Director of Operations
 Gill Ottley, Director of Operations
 Gordon Weir, Director of Resources
 Sharon Smith, Senior Solicitor (representing Kenny McClure, Head of Legal Services)
 Pamela Hill, Secretary
 Stuart MacKenzie, Intelligence and Methodologies Manager (items 4-7)
 Ingrid Gilray, Policy & Research Officer (items 4-7)
 Christina Naismith, Senior Inspector (items 4-7)
 Colin McAllister, Corporate Planning, Communications and Involvement Manager (Item 8)

Apologies: Carol Paton, Board Member
 Kenny McClure, Head of Legal Services

Item	Action
1.0 APOLOGIES FOR ABSENCE	

Apologies for absence, as listed above were noted.

Version: 3.0	Status: <i>Approved – 9 May 2012</i>	Date: 06/06/2012
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2.0 DECLARATION OF INTEREST

David Wiseman, Board Member made a declaration of interest in respect of Report Number SP-04-2012, item 6, as he was involved in the development of the strategic intelligence framework when seconded to the Scrutiny Bodies Project interim team.

3.0 MINUTE OF STRATEGY AND PERFORMANCE COMMITTEE MEETING HELD ON 17 JANUARY 2012

The minute of the meeting held on 17 January 2012 was submitted and approved as a correct record.

4.0 MATTERS ARISING

4.1 Item 4.0 –It was noted that the Convener of the Complaints Sub Committee and the Director of Operations (Intelligence and Complaints) had not yet met to progress the production of the intended report to Strategy and Performance Committee. The Director of Operations (Intelligence and Complaints) advised that the paper would be presented to Complaints Sub Committee on 17 April 2012 then Strategy and Performance Committee on 8 May 2012.

DoO (I&C)

Following the removal of a paper intended to be discussed at the Complaints Sub Committee on 8 March 2012 the Convener of the Complaints Sub Committee requested clarification of the process when items were referred to the Complaints Sub Committee from the Strategy and Performance Committee. The Chair advised that all papers should be considered by the Executive Team before they were presented to any Board or Committee meeting. The Chief Executive confirmed that the correct management of papers to be presented to any Board or Committee meeting would be ensured in future. If any issues arose with the submission of a paper these would be discussed with the Convener of the Committee prior to any action being taken.

It was noted that when the Complaints Sub Committee was formed part of its developing role was to provide assurance to the Board that intelligence gained from complaints investigations was acted upon in a consistent manner across the organisation. The Complaints Sub Committee remit would be reviewed along with the other committees' remits following the first year of business.

The Convener of the Complaints Sub Committee requested clarification about why the Complaints Sub Committee had not been consulted during the recent internal audit of complaints. It was noted that the internal auditors had not felt it necessary to approach the Complaints Sub Committee following their review of the handling of complaints. In hindsight, it was agreed that the

Version: 3.0	Status: <i>Approved – 9 May 2012</i>	Date: 06/06/2012
--------------	--------------------------------------	------------------

audit scope should have provided for a meeting with the Complaints Sub Committee.

4.2 Item 5.0 – The Chair advised members that the appendix to the previous minute had been revised, based on comments from the 17 January 2012 Strategy and Performance Committee, and passed to the Sponsorship Team. The Sponsorship Team had identified two areas, which should be more explicit within the plan. These were:

- The Care Inspectorate’s role in support of the regulation of the social services workforce by SSSC.
- liaison with Audit Scotland/Accounts Commission on the forthcoming integrated children’s services inspections and the contribution to integrated, outcomes-based Community Planning Partnerships scrutiny.

A summarised version of the revised plan would be re-submitted to the Sponsorship Team by 16 March 2012 for Ministerial approval.

**5.0 IMPROVING OUR CORE BUSINESS – QUICK WINS
REPORT NO: SP-03-2012**

The Director of Operations (Intelligence and Complaints) introduced the report, which was considered alongside items 6 and 7.

The Intelligence and Methodologies Manager provided an overview of the report, which updated the Committee on action taken by the Intelligence and Complaints Directorate to progress quick wins in improving scrutiny. The following updates were also provided:

- Displaying information in the RMS in a more meaningful way – the next step would be to help inspectors interpret the data.
- Revised Workload Management Tool – this would be completed by end May 2012 for all regulated care services.
- Setting up discussion forums – the service user engagement forum had asked key questions on engagement statements. The feedback would be used to inform intensity for the coming year.
- Ease of access to information within the Care Inspectorate – some information was difficult to access for staff not based in HQ. The News Today summary page, which would be communicated every Friday, would provide a more easily accessible method for staff to bring themselves up to date.
- Staff were working with ICT colleagues in all of these developments.

Version: 3.0	Status: <i>Approved – 9 May 2012</i>	Date: 06/06/2012
--------------	--------------------------------------	------------------

The Committee:

- Noted the quick wins identified by staff and the actions taken to put them in place.

6.0 STRATEGIC INTELLIGENCE FRAMEWORK REPORT NO: SP-04-2012

The Policy and Research Officer introduced this report, which informed the Committee of the progress made in developing the Strategic Intelligence Framework and presented the draft Strategic Intelligence Framework.

During discussion, the following points were noted:

- This was a helpful piece of work, which was being taken forward in very positive way. The Care Inspectorate now needed to deliver the outcomes as quickly as possible.
- Bringing all the intelligence together was vital but difficult. The vision should be more explicit with a paragraph exploring the ability to identify problems and risks in the sector, which may not be addressed by scrutiny but may need to be addressed within the sector and by other bodies, including Scottish Government.
- It would be important to be clear about how intelligence was used and what impact it had in securing improved outcomes for service users.
- The integration of social work and social care outcomes needed to be taken ahead through inspection. However, the Care Inspectorate also needed to be alert to how this affected the under delivery of social work and be flexible in the inspection methodology to take account of structural and legislative change.
- Further consideration needed to be given as to how health and social care professionals alerted the Care Inspectorate to information in order for this to become routine and not just a perception that information would be received through whistleblowing.
- A systematic and constructive way of collecting information from the new relationships with health and social care was needed.
- The issues of public expectation should be led and managed. The Care Inspectorate had a duty to inform society as to what “good” was and needed to consider how to do this effectively, including how to get staff and other stakeholders appropriately informed and engaged.
- Forward thinking was needed about using the intelligence to inform the public through possible “state of the nation” reports and how that would be most helpful. Similarly, there were practical methods of engaging people to give feedback, for example, the review of the National Care Standards and

Version: 3.0	Status: <i>Approved – 9 May 2012</i>	Date: 06/06/2012
--------------	--------------------------------------	------------------

addressing the health dimension of those in receipt of social care ie. acute hospitals. There had been a lot of progress but these were early steps.

The Committee:

- Noted the report and the progress made against the milestones for the project.
- Was assured that the general direction of travel was sound.
- Requested (given the central nature of the Framework to the business of the organisation) that the pace of the work be stepped up.
- Approved the Framework subject to the inclusion of a paragraph exploring the ability to identify problems and risks in the sector, which may not be addressed by scrutiny and encouraging/mobilising the sector and other public bodies including Scottish Government to address these.
- Endorsed the improvement plan for 2012-13, which would be submitted to the first full Board meeting in 2012-13 for final approval.

7.0 RISK FRAMEWORK REPORT NO: SP-05-2012

The Senior Inspector introduced the report, which informed the Committee of the progress made in developing the Risk Framework and outlined the further work, which required to be carried out. Staff would be advised in March 2012, mainly through team meetings, of what the self evaluation process would be from April until June 2012. Information would be compiled by managers and presented to the Executive Team. This would inform what the Care Inspectorate did in pre-inspection planning, operational planning and inspection.

During discussion, the following points were noted:

- The Framework was a commentary on the Care Inspectorate's ability to assess risk. From a governance viewpoint, this represented a good analysis but it was clear that further development work needed to take place. It was risk-based and proportionate although at that stage it was based on imperfect risk awareness.
- The purpose of the self evaluation was to build capacity and to build people's skills in assessing risk and turning information into intelligence.
- Following the development day held on 28 February 2012, individual workstreams were being developed.
- The Care Inspectorate was aiming for a more sophisticated, better-informed risk based approach than it currently had. A three year plan was required as time was needed for development. The Board needed assurance that this was

Version: 3.0	Status: <i>Approved – 9 May 2012</i>	Date: 06/06/2012
--------------	--------------------------------------	------------------

- being pursued as a priority.
- There was a related issue about attitudes to risk, particularly amongst people who used services and their carers. There was a need to measure and balance risk against informed choice. Professionals tended to be more risk averse than people who used services. There should be an emphasis on providing choice and this should be reflected in the approach to commissioning of services. The Care Inspectorate needed to provide guidance on how to help people make these choices and, to ensure that others were providing this choice.
 - The Care Service Questionnaires (CSQs) should be improved as there were gaps, particularly with regards to the views of carers.
 - The Care Inspectorate was uniquely placed in terms of the amount of evidence it held as was shown in the previous year with Southern Cross. Inspection staff routinely acquired soft intelligence and to add value to the work with local authorities the information could be shared. This work should be exploited and developed.
 - A risk assessment tool demonstration at a future Board event would be helpful. Other risk methodologies that were used could also be discussed. The Board could look at several different aspects of how the Care Inspectorate assessed risk and this could be done following the self evaluation.
 - There were a number of practical issues, which needed to be addressed before the methodology would be successful - these were being taken forward.
 - Risk and intelligence were closely linked and required convergence and alignment as appropriate.

The Director of Operations (Intelligence and Complaints) thanked the Committee for the very helpful discussion and points raised. In terms of governance it was confirmed that there would be an improvement plan that covered intelligence and risk and that the Programme Board would oversee this work. A report would be presented to the 14 June 2012 Board with one unified plan identifying remedial action.

The Committee:

- Noted the report and the progress made against the milestones for these projects and agreed that as for Intelligence the pace of the development work needed to be stepped up .
- Approved the draft Risk Framework and noted the work to be concluded in undertaking a comprehensive self-evaluation process in order to complete an improvement plan.
- Noted that a further report would be provided to the 14 June 2012 Board.
- Agreed that a future Board development session would

Version: 3.0	Status: <i>Approved – 9 May 2012</i>	Date: 06/06/2012
--------------	--------------------------------------	------------------

include an overview of the various risk assessments and a demonstration on the risk tool.

**8.0 INVOLVEMENT PLAN – INVOLVING PEOPLE, IMPROVING SERVICES
REPORT NO: SP-06-2012**

The Director of Operations (Planning, Assurance and Public Reporting) introduced the report, which presented the Committee with a progress report and invited comments on the draft Involvement Plan. The strategy had been developed in co-production with both a project and reference group following the 20 December 2011 Board. The co-production groups would continue work on the plan and a final report would be presented to the 14 June 2012 Board.

The Corporate Planning, Communications and Involvement Manager advised the Committee that the co-production groups felt that the document should be externally facing so that it did not look or feel like a typical paper ie. jargon should be limited and there should be no mention of “strategy” in the document. The group had produced an involvement charter which also embodied the organisation’s ambitions and which should thread through all of the Care Inspectorate’s work. Involvement continued to be embedded including bringing the Involving People group and the lay assessors all together for the first time. The impact of the actions to achieve the outcomes, of the plan, would need tested.

During discussion, the following points were noted:

- More work was needed on the outcomes to demonstrate the commitment to involving people as well as being able to evidence the benefit as the work had resource implications. The next phase of work by the group would focus on impact in order to provide measurable targets.
- Co-production, co-responsibility and co-authority went hand-in-hand. The actions should be ranked, costed and prioritised with expectations managed for people to accept which areas could be actioned within resource limitations.
- The Care Inspectorate was an exemplar for involving people which included, talking with people as part of the inspection methodology, which could be more explicit within the plan, as well as how the sector could be encouraged to improve involvement.
- Further thought and consideration was required on the issue of paying people for their involvement. The Care Inspectorate had continued with any payments that the successor bodies had paid previously. The Care Commission had received all “greens” and a commendation by internal audit for their involvement work. That review had provided some of the

Version: 3.0	Status: <i>Approved – 9 May 2012</i>	Date: 06/06/2012
--------------	--------------------------------------	------------------

evidence base to build the plan and the Care Inspectorate had moved on from there as a stepping stone.

- Work on “values” was important and the group’s contribution was invaluable but it did not represent all stakeholders. The Care Inspectorate would establish what was wanted for the organisation and involvement would inform that rather than shape it.
- The membership of the Involving People group should be kept under review to ensure wider representation.
- Fundamental within involving people was the capacity of the people who were involved and building a supportive framework to continue their involvement. Equally important was staff involvement and encouraging involvement within the inspection methodology.
- The Care Inspectorate should be careful not to over consult. The starting base was high and momentum should be maintained.
- The Chief Executive and the Chair were grateful to everyone who had been involved in this work and would arrange a meeting to give thanks personally.

The Committee:

- Noted the report.
- Agreed that further work was needed on the “outcomes” resulting from meaningful involvement.
- Welcomed the intention to broaden the range of those involved.
- Agreed that the momentum, which had been developed in taking the work forward, should be maintained.
- Noted that a final report would be presented to the 14 June 2012 Board.

**9.0 REPORT FROM COMPLAINTS SUB COMMITTEE:
24 JANUARY 2012 (UNCONFIRMED)**

The Convener of the Complaints Sub Committee drew the Committee’s attention to the lessons learned section of the minute.

The Committee:

- Noted the report.

10.0 AOCB

There was no other competent business.

Version: 3.0	Status: <i>Approved – 9 May 2012</i>	Date: 06/06/2012
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10.0 DATE OF NEXT MEETING – 13 MARCH 2012

The date of the next Strategy and Performance Committee was noted as 8 May 2012, Compass House.

Signed:

Professor Frank Clark CBE, Chair