

**2018-19**  
**quarter 2**  
**Performance report**

## Success measures

### Key performance indicators

1: Public assurance and building confidence

KPI1: Statutory inspections complete.

**91%**

(1,058 statutory inspections completed)

[Target 99%]

KPI2: People who tell us scrutiny helps improve services.

**staff: 99%**

**people experiencing care: 97%**

[Target 90%]

2: Informing policy

KPI3: People who say our national reports and publications are useful.

**Aiming to report in 2018/19**

[Target 90%]

#### Colour code

**Red** significantly below target (11% or greater under target)

**Amber** slightly below target (1%-10% under target)

**Green** target achieved

**Blue** no target, data only

**Purple** data not available

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

KPI4: Inspections involving an inspection volunteer.

**5%**

(144 inspections completed involving an inspection volunteer up to 30 September 2018)

KPI5: Complaints about care that are investigated within the relevant timescales.

**73%**

[Target 80%]

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

KPI6: Registration applications completed within timescales.

**80%**

[Target 80%]

KPI7: Staff absence rate.

**4.2%**

KPI8: Staff vacancy level.

**inspector: 5.3%**

**non-inspector: 8.4%**

KPI9: Complaints about us completed within timescales.

**81%**

KPI10: Audit recommendations met.

**No update available**

[Target 100%]



## Strategic Objective 1:

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

**Kevin Mitchell, Executive Director of Scrutiny and Assurance**

**Rami Okasha, Executive Director of Strategy and Improvement**

**Key priority 1.1: We will deliver an inspection programme across strategic and regulated care scrutiny which focuses our activities in the areas of highest risk, whilst ensuring we inspect all partnerships and care services regularly and robustly.** We will register new care services proportionately but robustly to ensure they meet the right standards. Our inspection methodology and business processes in strategic and regulated care scrutiny will develop to support the new National Care Standards, using a human rights and wellbeing based approach to help ensure the highest standards of safe, compassionate care for people using services. We will make sure that the views and experiences of people using services, and their carers, are central to our scrutiny and improvement work.

### Registered care scrutiny

In 2018/19, up to 30 September 2018, we completed 3,187 inspections, 256 fewer than the 3,443 we completed in the same period 2017/18. This included 1,058 (91%) of the statutory inspections planned for completion by the end of this quarter. We completed 402 registrations (42 fewer than the same period in 2017/18), 1,295 variations (304 fewer than the same period in 2017/18) and received 2,572 new complaints (195 more than the same period in 2017/18).

### Factors affecting capacity

The inspection performance in relation to children’s services has reduced this quarter with fewer inspections completed compared to the same period in 2017. Whilst staffing levels have increased due to a more proactive approach to recruitment, the timing of appointment of staff and the induction required has impacted on the level of inspections compared to the previous year. Across scrutiny and assurance there were approximately 17.6 full time equivalent inspector posts vacant or allocated to other work streams as at 30 September 2018.

The quality assurance measures introduced across scrutiny and assurance has led to concentrated work with staff to ensure their effectiveness in their role whilst impacting on their ability to undertake independent work until evaluated as competent.

Senior inspectors spend time contributing to a broad range of development and learning tasks, all of which contribute to an increase in the quality of work undertaken but reduce capacity to undertake inspections. This is being monitored to ensure effectiveness as a whole across all scrutiny and improvement work.

### Shared inspection framework

Significant work was undertaken across the summer with a number of early learning and childcare staff contributing to the development of the Care Inspectorate and Education Scotland shared inspection framework.

### KPI 1: % first statutory inspections completed

**91% (1,058 inspections) completed up to 30 September 2018**

96% (1,123 inspections) completed in the same quarter last year

Total number of scrutiny and improvement interventions

**7,456 up to 30 September 2018**  
(7,863 up to 30 September 2017)

## Strategic Objective 1: Public assurance and confidence

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Rami Okasha, Executive Director of Strategy and Improvement

### Key priority 1.1:

#### Developing and delivering our inspection programme

##### Developing methodology

We published quality improvement frameworks (QIFs) for children and young people in need of care and protection; self-directed support and criminal justice social work (community payback) and we refreshed and updated our QIF for strategic planning to incorporate the new health and care standards. We finalised a range of tools to support the new models of inspection, including file reading tools and guidance.

##### Supporting HMIP inspections

We worked with Her Majesty's Chief Inspector of Prisons for Scotland (HMIP) on an inspection of Her Majesty's Prison Addiewell.

##### Strategic planning and scrutiny – adults and older people

We carried out a progress review of services for older people in Edinburgh, carried out an inspection of strategic planning in Clackmannanshire and Stirling Health and Social Care Partnership (HSCP) and started a thematic review of self-directed support, carrying out fieldwork in two of six sites – East Ayrshire and East Lothian.

We trained a new cohort of associate assessors to work with us on the thematic review of self-directed support. Associate assessors bring an important perspective from current practice but involving them in inspections also exposes them to different approaches and tools of scrutiny and helps to build capacity for self-evaluation and robust quality assurance in the sector. Colleagues from our improvement team are helping us to evaluate the impact of our work with associate assessors in this review.

We established high level reference groups to strengthen stakeholder engagement and bring a collaborative approach to designing and delivering both the thematic review of self-directed support and our justice scrutiny.

##### Strategic planning and scrutiny – children and young people

We commenced fieldwork in the first two joint inspections of the new model for children and young people in need of care and protection, in Argyll and Bute and Fife.

##### Strategic planning and scrutiny – criminal justice

Working with stakeholders including Community Justice Scotland we agreed a process for deciding on the focus of, and priority areas for, the first two years of inspections of criminal justice social work.

We worked with staff and managers from South Lanarkshire criminal justice services to review progress in their improvement journey, following some serious failings identified last year. We provided support and challenge to ensure that their assessment was robust and that the next stage of their action plan was relevant and appropriately stretching.



## Strategic Objective 1: Public assurance and confidence

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Rami Okasha, Executive Director of Strategy and Improvement

**Key priority 1.2: We will ensure that our outcome-focused inspections identify how care services contribute to people’s wellbeing and reduce health and social inequalities, meaning we can help improve care where people do not experience the standard of care they should.** We will use evidence and intelligence to assess risk and plan scrutiny and improvement interventions for both regulated care services and joint strategic inspections of community planning partnerships and joint integration boards. We will assess how well strategic plans and joint strategic commissioning take into account and deliver positive outcomes that meet the needs and choices of people in local communities.

### Developing Methodology

We expect providers of care homes to regularly assess the care needs of people who use their service in order to ensure that the staffing complement supports positive outcomes for people. From 1 September 2018, we will no longer issue staffing schedules to newly registered care homes, and we will begin to make variations to the registrations of existing providers to remove staffing schedules from January 2019.

### Scrutiny transformational plan development

We have started work to develop a transformational plan which sets out how we will support improvement of care throughout the whole scrutiny process, from light touch improvement support interventions to leading national improvement programmes. We are currently undertaking a scoping exercise across the organisation to look at what is working well, how this could be developed and what the learning & development needs are.

### Outcome focussed improvement work

A daycare of children service had consistently low grades over several years. Colleagues undertook some specific improvement work across several months with the service. At the most recent inspection in July, outcomes across all four themes were graded as good with all outstanding recommendations having been met. The provider recognised the important role the improvement work has played in their improvement journey.

### Enforcement

We make enforcement decisions that are risk based and in quarter 2 we applied for interim suspension orders for two care homes for older people due to the risks identified to people experiencing care.

Colleagues within early learning and childcare have undertaken three enforcement cases where serious issues were identified in respect of the quality of care for children. Improvements identified include management arrangements, staff training and knowledge around child protection and recruitment practice. In addition, we identified child protection concerns in four childminders which led to them voluntarily cancelling their registrations. While this work did not lead to formal enforcement action it did take up significant scrutiny and assurance staff resources to address the issues, work with families, police and social work and the childminders to ensure the actions taken result in keeping children safe and promoting good quality childcare practices. While childminders may voluntarily cancel their registration we may also, where appropriate, make referrals to Disclosure Scotland for the disqualification list.

**KPI 2A and 2B: People who tell us our scrutiny interventions help services to improve**

**People who experience care: 97%**

**Staff in care services: 99%**

(People who experience care - 104 respondents, Staff- 305 respondents.)

Quarter 2 2017/18:

People who experience care: 92%

Staff in care services: 95%

## Strategic Objective 1: Public assurance and confidence

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Rami Okasha, Executive Director of Strategy and Improvement

### **Key priority 1.3: We will develop and implement an improvement strategy to underpin the Care Inspectorate's role in supporting care services and local partnerships to improve and attain the highest standards of care for people.**

This will describe how we will support improvement in collaboration with others, what we will do when improvement is too slow, and show how we will share examples of excellent practice in care. This will encourage learning and innovation, help services and the social services workforce to build capacity, and give greater public assurance about high standards of care.

#### **Secure care standards**

The children and young people's team continue to support the range of work streams supporting the development of the secure care estate, including the development of a set of specific standards that will sit under and complement the new health and social care standards.

#### **Building skills and capacity in the children's sector**

During the last quarter we delivered a number of presentations to external groups to support building skills and capacity across the children's sector. We supported the Scottish Social Services Awards (SSSA) to support the staff development and qualifications across the sector and we delivered a presentation on the observations of the Care Inspectorate on the provision of high quality services to children with additional support needs at the Scottish Government summit in Edinburgh.

#### **Implementing our improvement strategy**

We have continued to implement our improvement strategy by:

- Working with the Centre for Excellence for Looked After Children in Scotland (CELCIS) to identify where we could focus improvement support for looked after children.
- Two learning events with Scottish Prison Service (SPS) staff from Edinburgh and Glenochil on improvement and care about physical activity (CAPA).
- Working with Healthcare Improvement Scotland on key improvement work around dementia, frailty, palliative care and medicines management. We are also working with Healthcare Improvement Scotland to consider how to support improvement in the best way following strategic inspections.
- Working with Dundee City Council on a test of change to test out a collaborative way of working which will support improvement in adult support and protection from strategic inspection work.
- A strategic inspector and an improvement advisor are working together in a project with partners in Dundee to improve their public protection responses, following concerns identified in inspections of child and adult protection.
- We provided follow up sessions on improvement to Scottish Care local integration leads (LILs) including the Scottish Social Services Council and the Improvement Service to develop a further understanding of how to support improvement locally, how to link with our inspectors and opportunities to test out other frameworks to support improvement such as the public service improvement framework (PSIF).

#### **CAPA evaluation**

We have continued to work on the care about physical activity (CAPA) evaluation which is due to be published very soon. Early indications are that CAPA has had a very positive impact and we will provide a fuller update once the findings have been published.



## Strategic Objective 2:

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

**Rami Okasha, Executive Director of Strategy and Improvement**

**Key priority 2.1: Improve the way we collect, analyse, present and use intelligence.** This will help us keep pace as the way care is delivered changes. We will develop our systems to be able to better use data and information that is available to us, both to inform our own work and the work of others.

**Key priority 2.2: Developing our intelligence together with partner agencies, publishing evidence based reports and promoting examples of validated national and international good practice in the rights based delivery of integrated health and social care.** We will develop a programme of evidence based publications to inform local and national policy; these publications will include thematic reviews, statistical information, learning from serious incident reviews and significant case reviews, complaints and public protection work.

### **Professional development award in intelligence analysis**

Over the past year, members of the intelligence team have been undertaking a degree-level Professional Development Award (PDA) in intelligence analysis. During quarter two, six of the team were informed that they had successfully completed the full PDA, with a further two having passed the first module and still working on completing the final module. The course provider forwarded on a message from the independent external assessor commending the consistently high quality of submissions from Care Inspectorate staff, noting “...if this standard of analysis is maintained then the Care Inspectorate can look forward to many years of high quality analytical products”.

### **Publications based on our scrutiny evidence**

We published the following reports and resources in quarter 2:

- Joint inspection of adult support and protection in North Ayrshire, Highland, Dundee City, Aberdeenshire, East Dunbartonshire and Midlothian partnership areas
- Progress review following a joint inspection of services for older people in the Western Isles
- Progress review following a joint inspection of services for older people in Aberdeen City
- Improving Care 2018/19 – our public facing annual magazine, telling the public what we do and how we help improve care in Scotland using real-life stories from the past year
- Eating and Drinking Well in Care: good practice guidance for older people
- Animal Magic – an online publication showcasing the health and therapeutic benefits of being around animals for children and adults.

## Strategic Objective 2: Informing local and national policy

Rami Okasha, Executive Director of Strategy and Improvement

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Kenny Dick, Interim Executive Director of Corporate and Customer Services

**Key priority 2.3: Develop our contribution and exposure to trends, research and innovative practices emerging from national and international partners.** We will work together with partner agencies to identify emerging themes, trends, good practice, innovative models and areas of concern across all care service types and in the strategic provision of early learning and childcare, integrated health and social care, social work, and community justice. We will ensure that our activities act as enablers to the development of new and innovative models of care which can support better outcomes for people.

### Historic Child abuse inquiry

We continue to engage with the inquiry, and to respond to its formal notices requiring the production of information. Three further notices were responded to in quarter 2, involving the production of a significant number of documents. We have identified services we anticipate may be the subject of further notices and have started to assemble the information we expect that we may be required to produce.

### Evaluation of ELC expansion

The Care Inspectorate have been asked to work with Scottish Government on the baseline phase of the early learning and childcare (ELC) expansion evaluation. The scrutiny & assurance directorate have been asked to lead on our involvement. This project represents the first phase in a long-term evaluation of the proposed expansion of ELC in Scotland. By recruiting two cohorts of children – one being the last to experience the current provision of 600 hours, the other being the first to experience the extended provision of 1,140 hours – and following those cohorts as they progress through ELC, the overall evaluation will assess the impact of extended ELC hours on a number of child and parent outcomes.

Whilst still to be finalised, within this initial phase, there is likely to be a cohort of around 10 authorities, 202 settings and 2,748 eligible two year olds who started accessing funded ELC from August 2018. Data is to be collected, capturing the child and parent outcomes and other data. ScotCen have been commissioned to undertake this research data analysis.

### Improvement pilot

Work has commenced on gathering data for the improvement pilot within ELC and children & young people teams. An initial meeting has taken place and colleagues are beginning to capture the data required to establish the range of improvement undertaken within children's services.

### Centres of innovation

Shortlisting of the centres of innovation has taken place with a Care Inspectorate service manager involved in the shortlisting panel. Details of the successful applicants should be available soon with follow up work to take place to validate their performance.

## Strategic Objective 2: Informing local and national policy

Rami Okasha, Executive Director of Strategy and Improvement

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Kenny Dick, Interim Executive Director of Corporate and Customer Services

### Key priority 2.3: Develop our contribution and exposure to trends.

#### Additional graduate commitment inspection focus area

Work is ongoing with Scottish Government to evaluate the impact of additional graduates within ELC settings. The professional reference group for ELC is working on the specific questions required for the focus area and confirmation has been requested as to the sample model before exploring this further with the intelligence team. The additional graduate commitment says that by August 2018, every nursery in the most deprived areas will have an additional qualified teacher with early years expertise or childcare graduate with a BA in childhood practice.

It is estimated that 435 additional graduates will be required to deliver this commitment. The aim of this is to improve the quality of ELC provided to children in those areas, and ultimately to improve the development of those children.

The Care Inspectorate has agreed to support this by gathering information by making the role of additional graduates a specific focus area for the inspection year 2019-2020.

#### The hub

During this quarter we held a scoping workshop with both internal and external stakeholders, while also undertaking some online user testing with almost 200 respondents. We continued to work closely with the Scottish Government and Social Services Knowledge Scotland (SSKS) on this project.

#### Annual health and care intelligence conference

In September, the intelligence manager and the health improvement adviser (pharmacy) ran a workshop at “The Gathering”, an annual conference run by Information Services Division (ISD) focussed on data, information and intelligence in health and social care. The focus of the workshop was on how the Care Inspectorate has used intelligence to identify opportunities to focus our improvement work, and on examples of successful improvement work in medicines management.

## Strategic Objective 2: Informing local and national policy

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Rami Okasha, Executive Director of Strategy and Improvement

**Key priority 2.4: Continue to support a wide range of policy development and ensure that the Care Inspectorate is ready and able to respond to emerging policy agendas.** We will co-lead the National Care Standards development in a way which reflects voice, choice and control for people who use services and their carers, regardless of care setting, and ensure that principles around dignity and respect, compassion, inclusion, responsive services, and wellbeing are promulgated so as to be embedded in care service delivery.

### Developing a policy on autism

An adult services team manager is working on raising awareness of autism and developing a policy. A practice development group has been set up and training developed for all staff to attend. Links have been made with external autism experts and providers.

### Key policy developments

During quarter 2 we provided comprehensive briefings on the Scottish Government's programme for Government 2018-19, the new national performance framework and the Scottish Government and COSLA's publication on new public health priorities.

We followed and produced summaries of a number of Scottish Parliament committee sessions on the Health and Care (Staffing) (Scotland) Bill, as well as a summary of all the written responses received to the Health and Sport Committee's call for evidence on the Bill.

### Consultation responses

During this period we responded to the following consultations:

- Age of Criminal Responsibility (Scotland) Bill - Call for Evidence (Equalities and Human Rights Committee, Scottish Parliament)
- Protection of Vulnerable Groups and the Disclosure of Criminal Information: A Consultation on Proposals for Change (Scottish Government)
- Health and Care (Staffing) (Scotland) Bill – Call for views (Health and Sport Committee, Scottish Parliament)
- Health and Care (Staffing) (Scotland) Bill – Call for views (Finance Committee, Scottish Parliament)
- Review of Part 1 of the Children (Scotland) Act 1995 and creation of a family justice modernisation strategy (Scottish Government)
- Consultation on developing our approach to regulating registered pharmacies (General Pharmaceutical Council)
- Consultation on the Supporting Disabled Children, Young People and Their Families Resource (Scottish Government)
- Progressing Children's Rights in Scotland - An Action Plan 2018-21 (Scottish Government)
- Building Standards Compliance and Fire Safety – a consultation on making Scotland's buildings safer for people (Scottish Government)

### Strategic Objective 3:

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

**Rami Okasha, Executive Director of Strategy and Improvement**

**Key priority 3.1: Strengthen how we listen and act upon the views and experiences of people who use services and their carers to inform and continually improve our work, including by more pro-actively seeking their views and acting on them, and co-designing wherever possible.**

We will continue to involve people with experience of care services in our scrutiny and improvement work and seek to become an inclusive organisation able to help empower people who use services and their carers, so that together we continue to strive for innovation, improvement and excellence in our user focus activities

#### **KPI 4: Inspections involving an inspection volunteer**

**144 inspections up to 30 September 2018/19  
(5% of all inspections completed)**

Totals now include young inspection volunteers  
(Compared to 280 inspections (8%) by the same period last quarter)

#### **MM12: Number of people using services and carers that inspection volunteers speak with**

**1,154 in Q2 2018/19**

Totals now include young inspection volunteers  
Compared to 2,463 in same period last quarter

#### **Inspection volunteer update**

During quarter 2, inspection volunteers were involved in 144 inspections – 5% of all inspections completed in the quarter. During those inspections, they spoke with 1,154 people, 728 of whom were people who use care and 426 were relatives. These totals include 8 inspections which involved a young inspection volunteer.

Six group meetings in five local offices have been carried out with our adult inspection volunteers to share information, give advice and allow peer learning.

Our adult volunteers have been involved in strategic inspections for self directed supported services.

#### **Young inspection volunteers**

Our young inspection volunteers have been nominated for a Herald award for “Improving Children’s lives” with the award ceremony being held in Glasgow on 1 November 2018. In addition, one of our young inspection volunteers has been given the opportunity to be mentored directly by our First Minister Nicola Sturgeon, for the next 12 months.

We continue to recruit and train inspection volunteers with six new recruits undergoing our two day training course .

## Strategic Objective 3: Promoting standards, ensuring people are heard

Rami Okasha, Executive Director of Strategy and Improvement



**Key priority 3.2: Strengthen our role in executing our responsibilities for vulnerable people**, including for those whose ability to make decisions under the Adults with Incapacity Act is restricted, and our new role as a Corporate Parent.

**Key priority 3.3: Strengthen our approaches and develop new ways to listen** and gather real-time information on the views, opinions and experiences of people using care services and their carers, and use this information to inform and co-design scrutiny and improvement interventions.

### **Adult and child protection**

We have provided protection training for all staff across the organisation as part of the implementation of our protection procedures. We launched a handbook to guide our link inspectors in their work with a development day to upskill staff and ensure greater consistency in our approach.

### **SOFI2 training**

Adult services have continued to update new inspectors and all other inspectors' short observational framework for inspection 2 (SOFI 2) training.

### **Care about physical activity**

Through the CAPA leaning events work has been done to promote the new care standards from the perspective of moving more – this has been well received and helped services to think about what matters to people and how to support them individually.

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

**90% in Q2 2018/19**

(compared to 94% in the same quarter last year)

**Mainstream school care accommodation online survey**

Q2 2018/19:

98% of respondents were happy or very happy with the care they receive.

(92 responses received from 3 services)

## Strategic Objective 3: Promoting standards, ensuring people are heard

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Rami Okasha, Executive Director of Strategy and Improvement



**Key priority 3.4: Develop new approaches to receiving, assessing, considering and responding to concerns and complaints** raised by people about care services to ensure that our scrutiny and improvement interventions are effective, proportionate, and coherent across the range of our work

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

**73% of complaint investigations were completed within 40 days**

(811 out of 1,111 complaints were completed within the relevant timescale)

(compared to 77% in the same quarter last year)  
[Target 80%]

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

21% of complaints about the Care Inspectorate completed up to 30 September 2018 through frontline resolution.  
(compared to 38% in the same quarter last year)

### **New complaints procedure implementation update**

The new complaints procedure has been in place since November 2017 and there have been two quality assurance audits which have resulted in action plans and developments for staff. Feedback has also been sought on the policy and any amendments needed. At present 75% of complaints are assessed for investigation with 25% resolved through front line or provider resolution.

Our performance against the KPI is lower than last year as the system has changed, therefore comparisons are not like-for-like. Following agreement at the last Board meeting, the measurement has been modified to include complaints resolved through frontline resolution both before and after the introduction of the new procedure. In addition, the gap between a complaint being received and it being formally registered was not counted as time elapsed under the old procedure, but is now included. This means it now more fully represents the complainant experience.

The complaint's team have been working with business transformation on new ICT system that will launch in November 2018. At present complaints teams are taking part in testing of the new system.

### **Improving digital systems**

The digital transformation team delivered its first release into user testing environment. The "receive a concern" function is now being tested. Feedback is coming in from users which will help improve the overall feel and usability of the app.

A high level roadmap has been developed and sets out a development plan for the whole programme. This will help the programme board understand the interdependencies and highest value decisions in prioritising the team's work.

## Strategic objective 4:

We will perform as an independent, effective and efficient scrutiny and improvement body, working to consolidate excellence, deliver cultural change, invest in a competent, confident workforce and work collaboratively with partner agencies to support the delivery of safe and compassionate, rights-based care.

**Kenny Dick, Interim Executive Director of Corporate and Customer Services**

**Kevin Mitchell, Executive Director of Scrutiny and Assurance**



### Key priority 4.1: Develop a best value approach underpinned by an efficiency saving regime to identify areas for savings, investment, and growth.

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

### Effective staff deployment

The scrutiny and assurance directorate continues to support the development of career pathways and deploy practitioner inspectors and inspection assistants alongside our inspection workforce to make best use of resources.

We established a strategic inspector-led joint Care Inspectorate/Healthcare Improvement Scotland quality group to improve the quality of our inspection approach for joint inspections of strategic planning.

### Empowering staff

Staff developed and presented workshops on our new inspection approaches for children and young people, and for criminal justice, at the national social services expo in September.

### Lean sigma training

The executive group agreed two further cohorts (21 members of staff from across the organisation) would receive Lean Six Sigma Yellow Belt training following the success of the pilot and two previous cohorts.

### KPI 7: Staff absence rate

**4.2%**

**(for July and August only due to the implementation of the new HR system)**

short term 0.6%, medium term 0.6%,

long-term 3.0%

(4.1% in same quarter last year).

Chartered Institute of Personnel and Development (CIPD) average for the public sector is 4.3%.

### KPI 8: Staff vacancy levels

**inspector : 5.3%**

(9.9% in same quarter last year)

**non-inspector : 8.4%**

(7.1% in same quarter last year)

## Strategic Objective 4: Independent, effective and efficient

Kevin Mitchell, Executive Director of Scrutiny and Assurance

Rami Okasha, Executive Director of Strategy and Improvement

Kenny Dick, Interim Executive Director of Corporate and Customer Services



### Key priority 4.2: Support a programme of cultural change,

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

### Adult and child protection

A range of workshops were delivered to all scrutiny and assurance staff on the organisation's protecting people procedure. These events were planned, developed and delivered by a small group of inspectors with strong professional knowledge and expertise on adult or child protection. Feedback on the events have been very positive and the staff who developed the workshops have agreed to support their colleagues by collating and developing further trigger tools to support scrutiny activity.

### Bright ideas

This was stopped when the chief executive left and will be reinstated once the new chief executive joins the organisation in April 2019. In the interim the workforce can bring forward their comments and ideas via many other routes such as team meetings, training events, chief executive coffee mornings, senior management team office visits, through their line manager or directly to organisational and workforce development.

### Health and safety team elearning packages launch

In addition, the health and safety team have launched an eLearning package for all employees that includes a number of useful resources such as DSE assessments, loneworking, resilience and managing conflict sessions.

### Coaching

Phase 2 of our coaching programme has concluded and phase 3 is being procured now. This will provide direct and respectful challenge training to all managers and further coaching conversations training for all staff.

### Innovation challenge fund

Twelve bids were received from staff and we established a staff panel to select the successful bids. There are many interesting ideas emerging and an announcement on the successful bids will be made at the end of October 2018.

### Corporate learning management system

Work began in quarter 2 to build the LEAD approach on the new corporate learning management system (CLMS). A communication about the launch of LEAD will be shared at the end of October 2018 and the programme will be rolled out in early December 2018 aligning with the new CLMS launch.

### Healthy working lives

Regular monthly promotions are held in line with key monthly UK health campaigns. Examples of these include healthy holidays and staying hydrated, migraine awareness week, national fitness day, national stress awareness day and alcohol awareness week. In every single event, information campaign or activity, we have had excellent employee participation which we hope will continue as we take forward new activities, challenges.

### Maximising Attendance

Human Resources colleagues continue to work with management and employees to reduce our organisational absence levels. 4.2% (estimate – data only available for July and August) of working time was lost to sickness in Q2 and this compares with the 2.9% recorded in Q1. Long term absence is the biggest reason for the increase. While the figure has increased in Q2, it is accepted that we will observe fluctuations between quarters. Considering absence over a longer period, the working time lost to sickness is falling (3.9% in the 12 month period up to 31 August 2018, compared with 4.7% one year earlier).



## Strategic Objective 4: independent, effective and efficient

Kenny Dick, Interim Executive Director of Corporate and Customer Services

**Key priority 4.3: Develop effective and efficient ICT systems, digital services, and processes and practices**, tailored to the needs of different stakeholder groups, which strive for excellence, putting the internal and external customer at the heart of all our business activities.

### KPI 6: Registration applications completed within timescales

80% of registrations were completed on time up to 30 September 2018 (compared to 84% in the same quarter last year)  
[Target 80%]

#### Digital transformation programme

During quarter 2, work on our digital transformation programme continued. The digital transformation programme is designed to ensure our ICT systems support our scrutiny and improvement activities. Our contract with our external suppliers was due to end in late September 2018 but we decided to extend this until the end of November 2018. This is to support the continued pace of development and ensure the appropriate transfer of knowledge and skills to the longer term Care Inspectorate appointed team, a number of whom were recruited in quarter 2.

#### ICT modernisation programme

The major programme to improve our underlying ICT software and hardware remains on track to migrate all staff to the new cloud enabled careinspectorate.gov.scot environment. This project is closely aligned to our digital transformation programme and an increasing amount of collaborative working is taking place between the ICT technical team, the digital transformation team, NHS Education Scotland (the supplier of our Turas digital platform) and our appointed Microsoft Gold partner. Staff development planning is underway to ensure our ICT technical team have the skills necessary to work effectively in the new environment. The implementation work associated with the new payroll / human resources information system and service is progressing well. Phase 1 was completed by the end of September 2018. The first “live” payment to staff and board members will be on 31 October 2018. Phase 2 which involves further development of employee self serve (annual leave and absence) and reporting functionality is planned to be completed in quarter 3 and phase 3 (taxable benefits reporting P11D), on-boarding and residual employee self serve functionality, is planned for completion in quarter 4.

#### Contact centre news

In August 2018 35 calls were sampled to measure the quality of the service given and to provide evidence of our excellent customer service. The calls were of a very high standard and we have documented the details and given positive feedback to the advisers.

In July 2018 brainstorming sessions were held with the advisers to come up with suggestions and ideas for improvements within the team with the customer service strategy in mind. Skills, stats, quality assurance, training, and barriers that stop us from providing better customer service were discussed. The actions taken and progress made have been recorded in our Contact Centre folder and is ongoing.

Three staff members are making good progress with their SVQ 2/3 in customer service and have all received positive feedback from the SVQ development officer.

**SO4: independent, effective and efficient**

Kenny Dick, Interim Executive Director of Corporate and Customer Services

Rami Okasha, Executive Director of Strategy and Improvement

Kevin Mitchell, Executive Director of Scrutiny and Assurance

**Key priority 4.4: Develop a transformational change programme to further invest in a competent, confident workforce** which is empowered to support the delivery of safe, compassionate and rights-based care, including developing new career pathways and supporting the professional development of our staff in their specialisms.

**Key priority 4.5: Strengthen our governance arrangements** and success reporting so that we are transparent, accountable and open to challenge on how we evidence our success and use of public monies and resources. We will review in partnership with Scottish Government, our legislative framework to ensure it is fit for purpose and acts as an enabler in delivering our statutory responsibilities of providing protection and assurance for people who use services and their carers.

**KPI 9: Complaints about the Care Inspectorate completed within SPSO-recommended timescales**

**81%**  
(compared to 82% in the same quarter last year)

**Staff development events**

During September the scrutiny and assurance directorate held development events for team managers and senior inspectors. The main focus of the events were to support the development of the team manager and senior inspector role in line with the organisations corporate objectives and, in particular, to ensure the roles contribute effectively to the development of a confident and competent workforce.

**Career pathways work**

The pilot has now been refocused and extended to November 2019 to allow for a richer more focused source of evaluation to be undertaken that demonstrates the value and impact of the roles being piloted and those they work alongside.

**Job evaluation**

It was initially agreed with the partnership forum that there would be a three stage job evaluation process. The first phase of the job evaluation exercise reviewed all senior corporate and strategic grades is now complete, the second phase was for all other staff (except team managers/inspectors) and the third phase would be for team managers/senior inspectors/inspectors/practitioner inspectors. Phase 2 is nearing conclusion and involves 21 posts which affects around 43 postholders; 9 appeal dates are scheduled to take place between August to October 2018.

**Professional development awards**

Improvement sessions continue with Care Inspectorate staff and we are looking at how we now progress these to link with the PDA and support people with improvement projects.

**KPI 10: % Audit recommendations met**

**No update available**