

## Staff feedback on corporate plan

### Key findings

Overall staff were broadly positive about the corporate plan and most people could see their work reflected in it. However there were three clear areas where staff feel the plan could be strengthened:

- A number of staff commented on the language of the plan, suggesting that it was not written in a plain English style and contained too much jargon.
- Although a rights-based approach was welcomed by most, it was noted a number of times that there is a strong need to define what is meant by this within the plan.
- The absence of investment in staff, learning and development was noted by a number of staff, particularly in relation to strategic objective 6.

### Comments:

“What a refreshing read! I finished reading the plan motivated, and that is a refreshing change for any corporate planning document.”

“I think the shift to six slightly more detailed strategic objectives compared to the previous version i.e. 4 corporate outcomes makes it clearer and sharper.”

“Aspirational.”

“Helpful focus on improvement – seems different from previous years.”

“People who use services well reflected.”

“There are frequent references to a ‘rights based approach’. I am not sure that I fully understand what this means and think there is a need for the Care Inspectorate to explain to staff what this fully means.”

“Clear messages give impression of an organisation that has found its feet and pressing on with more robust approaches to scrutiny and improvement with a clear vision and plan.”

### What staff liked

- Good focus on vulnerable people – clear that this is what we should be about.
- Welcome the commitment to ensuring best quality in our own work, as well as expecting it from others.
- People who use services are well reflected.
- Good feel for rights, the person and improvement.
- Chair and Chief Executive’s messages link well – good introduction with clear messages.

## **Broad observations**

- Would welcome reference to our core values – these seem to be replaced by the human rights agenda, which seems more political and sometimes controversial.
- No clear reference to the organisation’s commitment to professional development for staff.
- The term “care setting” is used throughout. This is a bit dated and possibly excludes some of our work. Is it broad enough to include our strategic inspection programmes?
- The range of work is better reflected in the text than in the table of strategic objectives.
- Not confident we can deliver the plan in three years unless we review our inspection targets to allow staff space to support all this development.
- The corporate plan should include reference to childcare and learning in all aspects of the Care Inspectorate’s work to reflect early years provision. This would align with the introduction of the Children and Young People (Scotland) Bill.
- Where there are references to adult or child / children it would be more inclusive to say adults, child(ren) or young person / people.
- There is crossover between the six objectives, which means our performance reporting may become a bit repetitive – Ingrid is working on a strategy map to illustrate this.
- The plan should reference dignity and respect.
- We use the terms “regulatory” and “scrutiny” at different points. Should it not be one or the other for consistency?
- The importance of health and well-being should be strengthened within the objectives.
- A statement about the inter-connectivity between the strategic objectives would be helpful and an acknowledgement that, in order to ensure these are embedded across and through the organisation, the strategic objectives lead from the corporate plan right down to every individual's personal plan.
- There is an opportunity to develop more 'localised plans', which align the strategic objectives to specialism-linked plans. This wouldn't be part of the Corporate Plan but may lead on from this – somewhere between the team plan and the operational improvement plan (OIP). This would be a clearer link for every individual to see how the corporate plan flows to the OIP, then to their directorate, then their team, then their PDRS etc.

## **Suggested amendments/observations**

### **Foreword – Paul Edie, Chair**

- The last phrase in Paul’s foreword “in whose name we act” also appears at the end of Annette’s introduction.
- Further clarification required on how “technological advances will alter the way people are cared for”.
- With regard to demographic change, what specific changes are we referring to?

### **Introduction – Annette Bruton, Chief Executive**

- Paragraph 1 – the second sentence implies that outcomes were not a consideration before, which might cause offence to former Care Commission staff.
- Paragraph 4 – scrutiny should be targeted on services that pose the greatest risk to the vulnerable people who use them, not us.
- Paragraph 5 – important to talk about dignity and basic needs, for example health needs, being met.
- Paragraph 5 – might be useful to list the human rights referred to in an appendix, or make reference to exactly which ones we are referring to, together with the Public Sector equality duty included in the Equality Act 2010. This would help to clarify what makes this approach different.
- Paragraph 5 – we state that in the future we want inspectors to be able to operate with “more flexibility”. Is the legislation able to support this?
- Paragraph 6 – we state that it is our job to “support” services to improve where necessary. Does this mean show them the way or through regulation? This statement seems at odds with the next sentence which suggests enforcement.
- Paragraph 6 – we state we “expect immediate action”, however this can only happen if the legislation supports it.

### **Our vision, our purpose, our values**

- This is not just about supporting improvement and signposting good practice externally. It is also about keeping abreast of current good practice internally and being pioneers in innovative practice / improvement through the quality improvement part of the organisation. Working in partnership to develop educational solutions to support improved quality of care.
- Bullet point 3 – should we not be driving improvement, rather than “supporting”, particularly at the lower grades.
- Bullet point 4 – a catalyst doesn’t change as a result of the process it is facilitating.

### **About the Care Inspectorate**

- This section should be more succinct in order to ensure the key messages are clear.

### **Our expectations**

- We refer to “choices”, however this can be extremely limited.

### **How we contribute to this expectation**

- It should be noted that as well as demanding improvement, the organisation signposts to good practice and offers tools to support services in areas they need to improve.
- Bullet point 5 – how effectively is this reflected in our legislation to enable professionals to take the desired action?
- Bullet point 7 – rather than investigating complaints “against” care providers and the Care Inspectorate, it should read “about” care providers....This would align with the wording in the new model complaints handling procedure and is viewed as being less pejorative (Ewan Stewart)
- Bullet point 8 - should be strengthened to align with our vision. We shouldn't just be registering care services that meet the standards set out in legislation, but services that are planning to provide high quality care services and current best practice.
- Bullet point 12 – are our legislative powers robust and applied rigorously enough to meet our corporate objectives? Are there any plans to review the legislation?
- An additional bullet should note that “we work to encourage innovation and improvement in services by highlighting effective and innovative practice via scrutiny activity, regular publications and other improvement projects.

### **The environment we work in**

- Omitting reference to the very challenging financial climate in which care is provided might be questioned.
- Are we acting as a catalyst or supporting / encouraging innovation? We should not just be a catalyst but a driver.
- Paragraph 3 – this is where registration is important.
- Paragraph 6 – investment in staff should be included here.

### **Our plans 2014 – 2018**

- Second paragraph – “build the capacity of the organisation” – should this instead be ‘capability’ or ‘capacity and capability’?

**How the Care Inspectorate's outcomes support the Scottish Government's strategic objectives**

- Table 1 – why does outcome 3 not tick the 'safer and stronger' box?
- In table 1 there is no mention of inspection specifically, only "regulation". "Care" is also used rather than 'care and support.
- Table 2: "We have tackled the significant inequalities in Scottish society" – this has implications for registration. There will need to be guidelines / links to planning permission and demographic need.
- Table 2: "We have tackled the significant inequalities in Scottish society" – this will need to be addressed at a national level with many new services limiting access to their services through the use of prohibitively high fee rates. Further collaborative work may be required to ensure that the human rights of rich and poor are addressed through choice, availability and affordability of care services to meet their assessed needs.
- Table 2: "We have strong, resilient and supportive communities where people take responsibility for their own actions and how they affect others" – how are they accountable? Is there legislation in place to support action against them to improve?

**Strategic Objective 1**

- Is "care settings" the correct word? Should it not be 'the quality or standard of care'?
- Many of the improvement tools we've developed such as Make Every Moment Count will support the process described in this objective. Some examples in the plan might be useful to allow a greater understanding of this.
- 1.3 – "Review our complaints process" – should this not instead read as 'refine' or 'constantly improve', as we've already reviewed our complaints process.
- 1.3 – do we plan to learn from the complaints review or learn from complaints? This is unclear.
- 1.3 – do we plan to get feedback from complainants and through inspection activity to evidence that action taken as a result of the complaint has improved outcomes for people using the services?
- 1.3 & 1.9 – We should survey users for their views on satisfaction with the customer experience and confidence in the processes.
- 1.7 – our quality assurance and PDRS should be empowering staff to perform at their best and at their most efficient and effective level.
- 1.7 – will this include reviewing the effectiveness of our regulatory activity on poorly performing services to ensure that improvements have been made and sustained?

- 1.8 – in terms of new ways of publicly reporting, some of the improvement stories would be useful in terms of demonstrating measurable and positive improvement and quality care to the public.
- 1.9 – What is meant by this? The registration process is our chance to ensure that each service registered has sufficient understanding, expertise and resources to meet regulatory requirements and establish, sustain and improve the quality of care they shall be providing after registration. We don't want to lower the bar and make it more "easily accessible".
- Add: "regularly publish statistical information about care services." (Ingrid Gilray)
- Add strategic objective 5.3 into strategic objective 1. (Kevin Mitchell)

### **Strategic Objective 2**

- Improvement work has people's rights at the heart of it. More work needs done internally and externally to embed some of the good practice and contribute to the various discussions within this objective.
- 2.5 – how does being a "gate-keeper" align with statement 1.9 about making the registration process more "easily accessible"?
- 2.5 – there are issues with the "corporate veil" protecting individuals who have previous negative involvement in care provision and the legislation's ability to address this.

### **Strategic Objective 3**

- 3.1 – many people do not have a voice. We need to address this.
- 3.3 – does this involve carers in the care service?
- There is a big challenge in terms of getting data and feedback from the sector on the impact and success stories. This is an area where we could be more successful if we considered our approaches.
- There should be greater emphasis / clarity on our educative role, with a responsibility to inform people of the expectations they should have of good quality of care and how care services operate so that they become better informed and assertive consumers of these services.

### **Strategic Objective 4**

- The quality and improvement framework is essential and needs to be aspirational, but also realistic – this will be key in terms of the integration agenda.
- 4.4 – part of this priority should be that we will support care services to utilise these good practice resources – this could be an integral part of our improvement agenda. This seems too passive a priority.
- 4.4 – should this not refer to The Hub?

- It's not just about developing the resources but about promoting, testing, evaluating and continually revisiting to improve further.
- We cannot build capacity in care settings ourselves, but contribute by supporting continuous improvement through dialogue during and after and between inspections; and supporting strategic inspections, particularly in the role of scrutinising commissioning arrangements to ensure an outcomes-focus for service users.
- There is an opportunity to make more explicit our role in promoting and supporting self directed support in ensuring individuals receiving care are aware of and understand their rights in terms of having greater choice and control over the care they receive (this is also linked with strategic objective 1 about our role in public assurance).

### **Strategic Objective 5**

- 5.1 – seems to be more geared to national policy development rather than service led development.
- Add: “regularly publish statistical information about care services.” (Ingrid Gilray)
- Add: “find more ways of making information available and useful to inform our own work.” (Ingrid Gilray)
- Add: “report on trends at local authority level (e.g. key stats for strategic inspectors).
- Add: “ensure that all new processes capture relevant high quality data as a by-produce, which can be used to improve efficiency, accountability and transparency, and to inform national policy and debate.” (Ingrid Gilray)
- Add “Engage positively with policy developments and inquiries by responding in a consistent, evidence-based manner and utilising the experience and expertise of staff to inform discourse.”

### **Strategic Objective 6**

- With the move to specialist teams, it would be good to detail that staff development / organisational development plan will be aligned to support this – as well as leadership.
- Our key asset is our people and how we plan effectively to ensure that we make best use of their skills, expertise and time – inspection planning / workforce planning. This should be included somewhere in the plan.
- 6.2 – this will require clear lines of responsibility and role responsibilities, and a practical understanding of operational regulatory work at management level and above.
- 6.3 – would prefer this priority to read as “Strengthen our governance arrangements, programme and project planning, management and performance reporting so we are....”

**Agenda Item 12**  
**Appendix 2b**

- 6.5 – should we not also consider reviewing our legislation to ensure that it enables us to achieve our corporate objectives effectively and efficiently?
- 6.5 – we should also be considering investment in staff to improve our effectiveness and efficiency.