



Monitoring our Performance Q4 2011/12

Report to: Strategy and Performance Committee

Date: 8 May 2012

Report by: Karen Anderson, Director of Operations (Planning, Assurance, Public Reporting)
Sophie Siegel, Information Analyst
Ingrid Gilray, Policy and Research Officer

Report No: SP-09-2012

Agenda Item: 7

PURPOSE OF REPORT

To present the Q4 2011/12 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.	
	Legal Services			
	Resources Directorate			
	Committee Consultation (where appropriate)			
	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: 30 April 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 2011/12 which are contained as performance measures within this report.

2.0 SUMMARY OF PERFORMANCE Q4 2011/12

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

2.1.1 Summary of progress and main achievements

We continue to build upon Q3 progress and focus on inspecting poor performing services as well as sampling services that are low risk or with grades of 4 and above. We planned to carry out 7809 inspections in care services (this includes inspections planned to be carried out in services that cancelled during 2011/12) and we carried out 7489 inspections (this includes inspections carried out in services that cancelled during 2011/12). As a number of services cancel before we are able to carry out the planned inspection, we base the rate of inspections completed on services that were still registered with the Care Inspectorate at 31 March 2012. Overall during the inspection year 2011/12 we completed 99.1% of the number of inspections that we planned to do (in services registered with the Care Inspectorate at 31 March 2012). Reasons for not inspecting services that were planned for inspection are: services becoming inactive, proposing to cancel or returning to actively providing a care service during the last two month of the inspection year.

We are making good progress towards meeting our commitment to develop a model of scrutiny and improvement of children's services within the time frame set by Scottish Ministers. In Q4 we drafted a methodology and established the quality indicator framework. The development test site arrangements are all complete. We commenced the testing of the methodology of the joint children's services inspections on 23 April 2012 in the Angus Council area. A further five Local Authority areas are programmed for scrutiny in 2012/13 led by multi-disciplinary and integrated teams. The new methodology includes sampling of registered care services as part of the overall strategic scrutiny.

During March 2012, we completed 4 events across Scotland on vision and values and joint inspections of services to children. Overall 422 members of staff attended these events and provided valuable input into the development of Care Inspectorate values as well as being informed on and influencing the new model of scrutiny for services to children. A summary analysis report on the values feedback from staff will be complete by mid-May 2012 for Executive Team consideration and further action.

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

We conducted the second round of Scrutiny, Intelligence and Risk involvement events for staff across the country in January 2012. At these events we provided feedback to staff on the work to date and gave a final opportunity to inform and influence the progress and direction of the projects. The synopsis of these events is currently being prepared and will be approved by the end of April 2012.

The strategic intelligence framework, the risk framework and a number of quick wins arising from these agendas have been completed and presented to and discussed by Board members at a Board Development Day and the Strategy and Performance Committee. We are now combining the two project streams into one main project and finalising one Care Inspectorate Intelligence and Risk Action Plan. This will include a detailed list of activities and tangible outcomes for year 1 for presentation to the Board in June 2012.

We have completed proposals for revising the Care Inspectorate's complaints procedures and these will be presented for agreement to the Strategy and Performance Committee in May 2012.

We have completed a scoping exercise in respect of the Care Inspectorate's quality assurance procedures and this will be shared and discussed with senior staff in April 2012 with a view to developing proposals and options for future improvement. A position paper will be presented to Strategy and Performance Committee in May 2012.

We have updated the inspection procedure for regulated care services as well as the inspection report writing guidance and the provider inspection guidance. Additionally we have defined the intensity of inspection of regulated care services and we introduced the pre-inspection proforma to assist inspectors in gathering evidence or information for inspection.

2.1.2 Registrations

At 31 March 2012 there were 14,328 registered care services. This is 1.4% fewer than the 14,538 services at 31 March 2011. This reflects social care market fluctuations in the care home sector.

By 31 March 2012 we had completed 1165 new registrations, 686(59%) of which were childminders and 479 (41%) were other service types.

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

- 87% of childminding registrations completed within three months
- 90% of registrations of other service types completed within six months

Although the statistics above exceed our performance target, they also reflect

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

for example delays in prospective providers providing relevant information or documentation to the Care Inspectorate to progress applications quickly and effectively.

Over the year to 31 March 2012 we cancelled 1313 registered services. Although the overall number of new registrations is lower than in the Care Commission's last year, the unexpected collapse of multiple providers of adult care homes, such as Southern Cross and Choices, has placed significant additional demands on resources. Further increased registration activity arose in Q4 when 45 adult services previously run by Highland Council were transferred over to NHS Highland in March 2012.

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 31 March 2012 we received 3843 variations. Of these, 2329 had been completed between Q1-Q4, 1124 variations were in progress and 390 had been withdrawn. At 31 March 2012, 85% of childminder variations and 84% of other service type variations had been completed within 3 months. This meets the internal target set by the registration team in October 2011 and reflects the 3 months' notice required for variation applications by providers as specified in SSI 2002 No 29 Regulation 4(2).

Improvements have been made to the fitness checks for registration applications. These include checks on regulatory history and social work involvement and issuing guidance for staff on criminal record fitness assessment. In the light of the UK wide implications of service failure, regulatory histories are being discussed with other UK regulators who have had previous registrations elsewhere in the UK.

A system to monitor the consistency of decisions regarding registration fitness including where there have been refusals to register is currently being evaluated by the Registration Team.

2.1.3 Complaints

We received 2855 complaints between 1 April and 31 March 2012, which is an increase of 14% on the 2496 complaints the Care Commission received over the same period last year. We formally registered 1704 complaints, and completed 1586 complaints between April 2011 and March 2012. This includes complaints which the Care Commission received in 2010/11 and were completed by Care Inspectorate in 2011/12.

We dealt efficiently with complaints: overall during 2011/12, 97% of complaints were acknowledged within three days and 99% of investigations were completed within 28 days or the complainant notified of an extension to the timescale. Reasons for delay include staff absence and delay in extension approval. We made changes during Q4 to the process of logging

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

complaints received outwith the National Enquiry Line which has resulted in a slight improvement to the KPI. In Q4 acknowledgement letters were sent within 3 days in 98.4% of cases. We will continue to monitor and improve these figures

We received 55 complaints against the Care Inspectorate in 2011/12. Of these, 15 were completed, 28 were withdrawn and 12 remain in progress. This is in comparison to the 39 complaints received against the Care Commission in 2010/11.

We have completed 25 complaints against Care Inspectorate since 01 April 2011. Three complaints against the Care Inspectorate were upheld, 11 were partially upheld and 11 were not upheld. Of these 25 complaints completed, 10 were made against the Care Commission in 2010/11 and were completed in 2011/12.

We completed proposals for revising the Care Inspectorate's complaints procedures and these will be presented for agreement to the Strategy and Performance Committee in May 2012.

2.1.4 Inspections and inspection findings

2.1.4.1 Care service inspections

Between 1 April and 31 March 2012 we carried out 7489 care service inspections.

We carried out around 300 inspections in services that later cancelled in 2011/12 and almost 200 these inspections were in Adult services (Care Homes, Housing Support Services and Support Services), most of which were part of the re-registration of Southern Cross, CHOICES and Highland Council services. Another 55 inspections were carried out in childminding services that later cancelled. 5 children services inspected in 2011/12 that received grades 1 and 2 for all themes cancelled their registration.

Our inspection targets were revised at the end of the inspection year 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 01 April 2012. As our inspection planning is flexible 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 from the target, we planned to carry out 7256 inspections. Overall during the inspection year 2011/12 we completed 99.1% of the number of inspections that we planned to do (in services registered with the Care Inspectorate at 31 March 2012). Reasons for not inspecting services that were

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

planned for inspection are services becoming inactive, proposing to cancel or returning to actively providing a care service during the last two month of the inspection year.

A total of 5,110 care service inspections (68%) were carried out as unannounced inspections. A further 1,924 inspections (26%) were made at short notice and 450 inspections(6%) were announced inspections. Reasons for short-notice and announced inspections include joint inspections with Education Scotland and the need to ensure that childminders or housing support staff were available on the planned inspection date.

An additional 429 care service inspections (5.7%) 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.

2.1.4.2 Child Protection inspections

In 2011/12 we were scheduled to complete 12 child protection inspections, all of which were done according to the inspection plan.

Of the 12 multi-agency Child Protection Inspection completed in 2011/12, Argyll and Bute received a 'weak' grade for one quality indicator and Stirling for two quality indicators.

The report for Dundee will be published on 17 May and for Fife on 14 June 2012.

Perth and Kinross achieved the best multi-agency child protection report to date, becoming the only multi-agency partnership to achieve a grade of 'excellent' in meeting the needs of children and young people.

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

We completed ISLAs and follow-up scrutiny of 15 local authorities and published all 15 scrutiny reports on our website.

Reports were published within the prescribed timescales in all instances. We continue to involve people who use services and their carers in 100% of scrutiny sessions.

We have completed ISLAs and follow-up scrutiny of 28 of the 32 local authorities in Scotland by 31 March 2012 as per the current year inspection plan. The remaining 4 ISLAs are planned for completion in Spring/Summer 2012.

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

2.1.5 Other scrutiny activity

2.1.5.1 Enforcements

The number of enforcement notices that we issued in 2011/12 is summarised by area in the table below. The Care Inspectorate issued 72 non-technical enforcements in 2011/12, the same number as the number of non-technical enforcements that were issued last year. The number of enforcements, particularly in the East area reflects implementation of the Care Inspectorate policy position on taking swifter action where improvements are not being made. Following reorganisation of geographic areas on establishment of the Care Inspectorate, the East area absorbed two smaller regional areas within the Care Commission and therefore now has the largest amount of registered care services.

Non-Technical enforcements Q1 – Q4 2011/12
(Note: this table excludes ‘technical’ enforcements which are not related to the quality of the service.)

Area	Number of Notices 1 April - 31 March 2012	Total Number of Services
Central & West	6	3
East	45	29
North	12	9
South	9	6
Scotland	72	47

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

3.1 Summary of progress and main achievements

The further development of the involvement strategy got underway in quarter 4 and a project group consisting of both Care Inspectorate staff and people who use care services and carers was put together to work in a co-productive way to produce a more meaningful document. The project group held five sessions to look at different parts of the strategy and the resulting draft Involvement Plan - "involving people, improving services" was presented to the Strategy and Performance Committee in March 2012. The project group will continue to consult with stakeholders and finalise the document in Quarter 1 2012/13. An Involving People Group meeting was held in Stirling in quarter 4 and some members of the group also met the Director General (Health and Chief Executive of NHS Scotland) to discuss involvement and the benefits it could bring to organisations and individuals alike.

We introduced a Care Inspectorate National Enquiry Line for the public on

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

1 April 2011 to replace the former five Care Commission Lo-Call numbers. The aim of this line was to make the Care Inspectorate more accessible, and since its launch we have dealt with a range of calls from information requests to serious complaints. Although initially staffed by members of the complaints and registration teams, the national enquiry line is now staffed by a dedicated team of admin staff with back up from inspectors who deal with around 2500 calls per month. The majority of calls relate to new registration enquiries, complaints and concerns and staff and office details.

3.2 Grading

50% of all care services graded at 31 March 2012 had received a grade 5 or 6 for Involving People quality statements. This means that half of all care services inspected during 2011/12 demonstrated very good or excellent quality practices in involving people who use care services in the delivery of the service. Overall 87% of services have at least a grade 4 for all involving people statements, another 11% have a 3 as their lowest grade with only 1.4% having any grades of 1 or 2.

Overall, only 3.6% of graded care services have grades of 3 or less for all quality themes assessed by 31 March 2012, this compares to 3.8% of graded services by 31 March 2011. We continue to work with these services to drive up improvements and will not hesitate to take enforcement action where this is required.

3.3 Satisfaction with care services

We analysed questionnaires from 3837 services in 2011/12. The Care Standards Questionnaires are completed by people who use services and their relatives and carers. Over the whole year 2011/12 94% of care services had 90% or more respondents who were satisfied or very satisfied with the overall quality of service. We will review the use of this as a quality indicator in our KPIs for 2012/13.

3.4 Publication of inspection reports

Of the 6496 draft care service inspection reports issued between 1 April and 31 March 2012, 87% were issued within 20 working days, compared to 68% in Q4 2010/11. The 13% of draft care service inspection reports not published within timescale were due to protracted discussions with providers and staff illness.

A total of 5866 care service inspection reports were finalised between 1 April and 31 March 2012. 95% of final inspection reports were published within 13 weeks. The additional 5% were delays due to awaiting provider feedback and staff absence. This is compared to 83% of final reports published within the deadline in the same period of 2010/11.

All twelve final Child Protection Inspection reports were published within the

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

14 week target.

All ISLA reports were published within the timescale.

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

4.1 Summary of Q1-Q4 progress and main achievements

Workforce planning

A diary exercise commenced on 1st September to record the hours spent by Inspectors on Registrations, Inspections, Enforcements, Complaints and Variations. The purpose of the diary exercise is to enable more accurate workload, workforce and budget planning.

Data for inspections carried out between 1 September 2011 and 31 March 2012 is currently being analysed and evaluated by the Workforce Planning Group.

An interim analysis of the data from complaints cases (273) completed between September and December 2011 has shown that the average time spent by the Inspector investigating a complaint is 16 hours. This may vary depending on service type and also post complaint activity. The continuation of the diary exercise enables more robust analysis for both complaints and inspections to be available in May 2012 where it will be considered by the Workforce Planning Group.

To date for Inspections and Complaints we have observed a response rate of over 99%, which shows that the diary exercise is being well supported by staff. Through regular reporting and communication between the Intelligence and Methodologies team and the IPMs, National Managers and Directors it is hoped that we can achieve and maintain a response rate as close to 100% as possible.

Public reporting

- During 2011/12 we received 114 FOI requests and we responded to all of these. This includes requests received by the Care Commission before 1 April 2011. There are 2 requests still in progress.
- We also received 47 Data Protection requests in 2011/12, and responded to all of these. Four requests are in progress.
- We received 143 parliamentary questions in 2011/12 and we responded to 143. These include requests received by the Care Commission before 1 April 2011. One request is still in progress.

For the Change Development Programme relating to children services the following actions have been completed:

- New methodology for joint inspections of children services

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

- New Quality Indicators Framework
- Staff teams allocated and training commenced
- Communication Plan developed

4.2 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 measures the satisfaction of care service staff and service users with the inspection and records the extent to which they believe the service quality will improve following inspection. In 2011/12 94% of staff and 83% of service users thought that the quality of their care service would improve following the inspection.

4.3 Involvement of people who use services and carers

Of the 7,489 care service inspections undertaken, 276 inspections (3.7%) involved one or more Lay Assessors during the inspection year 2011/12. This compares to 348 out of 11,642 (3%) inspections involving lay assessors in 2010/11. The reduction in absolute numbers of Lay Assessor involvement was primarily due to availability of Lay Assessors and an identified need to recruit more Lay Assessors as well as a reduction in the number of overall inspections. The involvement strategy and recent Board decision to increase user focus will address this issue in future.

All Child Protection Inspections completed in 2011/12 involved children, parents, carers, foster carers, other support networks, focus groups with staff and individual meetings with staff.

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

4.4 Variance from planned budget

The projected net budget variance based on February's ledger is an underspend of -4.91%. In response to this underspend we agreed with our Sponsor branch not to draw down £1.2million in grant-in-aid

4.5 Absence reporting

The sickness absence percentage for Quarter 4 (Jan to March 2012) is 4.7%. Of which, 1.8% was short term sickness and 2.9% was long term sickness.

For the year 1 April 2011 to 31 March 2012 the overall percentage was 4.3%, 1.6% was short term sickness and 2.7% was long term sickness.

Version: 4.0	Status: <i>Final</i>	Date: 06/06/2012
--------------	----------------------	------------------

4.6 MOUs

We have completed 12 MOUs and another 5 are at the final draft stage and are very near completion.

5 SUMMARY OF PERFORMANCE AGAINST KPIS Q4 2011/12
Unless otherwise indicated, all figures are cumulative totals for the year

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes												
KPI 1: % of regulated care services with grades of 3 or less for every quality theme	To be established	3.8%	3.9% of graded services have grades of 3 or less for every quality theme	3.6% 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 7794 registered and graded care services (other than childminders) 308 services (3.9%) have grades of 3 or less for all quality themes. Of 5123 registered and graded childminders 183 services (3.6%) have grades of 3 or less for all applicable quality themes.												
KPI 2: % of inspections completed against planned number of inspections	To be established	1707 care service inspections completed (80% of target for Q1, 20% of the annual target)	3469 care service inspections completed (87% of target for Q1 and Q2, 42% of the annual target)	5395 care service inspections completed (93% of target for Q1-Q3, 67% of the annual target)	7489 care service inspections completed (99.1% of target 2011/12, based on services still registered with the CI at 31/03/12)	<table border="1"> <thead> <tr> <th></th> <th>Number of inspections</th> </tr> </thead> <tbody> <tr> <td>Central & West</td> <td>1972</td> </tr> <tr> <td>East</td> <td>2325</td> </tr> <tr> <td>North</td> <td>1653</td> </tr> <tr> <td>South</td> <td>1539</td> </tr> <tr> <td>Total</td> <td>7489</td> </tr> </tbody> </table> <p>Note 1: the total number of care services eligible for inspection decreased this year due to changes in the frequency of inspection policy. Note 2: Scrutiny Inspections completed are reported on the basis of the date on the report.</p>		Number of inspections	Central & West	1972	East	2325	North	1653	South	1539	Total	7489
	Number of inspections																	
Central & West	1972																	
East	2325																	
North	1653																	
South	1539																	
Total	7489																	

Version: 4.0

Status: *Final*

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes
KPI 3: % of non-programmed additional inspections completed against planned number of inspections		4 Local Authority Scrutiny Inspections completed 4 CP2 inspections completed 0.5% (8 inspections)	9 Local Authority Scrutiny Inspections completed 6 CP2 inspections completed 1.4% (47 inspections)	13 Local Authority Scrutiny Inspections completed 9 CP2 inspections completed 3% (163 inspections)	15 Local Authority Scrutiny Inspections completed 12 CP2 inspections completed 6% (429 inspections)	429 inspections of the total 7489 inspections completed were unplanned additional inspections

Version: 4.0

Status: Final

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes															
							Number of inspections	%													
KPI 4: % of unannounced inspections as % of inspections completed		63% (1075 inspections)	63% (2189 inspections)	66% (3564 inspections)	68% (5110 inspections)	<table border="1"> <tr> <td>Unannounced</td> <td>5110</td> <td>68%</td> </tr> <tr> <td>Announced</td> <td>450</td> <td>6%</td> </tr> <tr> <td>Announced (short notice)</td> <td>1924</td> <td>26%</td> </tr> <tr> <td>Not recorded</td> <td>5</td> <td>0.04%</td> </tr> <tr> <td>Total</td> <td>7489</td> <td>100%</td> </tr> </table>	Unannounced	5110	68%	Announced	450	6%	Announced (short notice)	1924	26%	Not recorded	5	0.04%	Total	7489	100%
Unannounced	5110	68%																			
Announced	450	6%																			
Announced (short notice)	1924	26%																			
Not recorded	5	0.04%																			
Total	7489	100%																			
KPI 5: % of requirements in 2010/11 that were met in 2011/12	Monitor trend				77% of requirements made in 2010/11 were met in 2011/12. This relates to 1056 services with requirements made at their final inspection in 2010/11 that were then inspected in 2011/12.																
KPI 6: % of LA receiving positive reports for Child Protection Inspections	To be established	100% (4 inspections completed)	100% (6 inspections completed)	78% (9 inspections completed)	83% (12 inspections completed)	10 out of 12 Local Authorities received positive reports for Child Protection Inspections															

Version: 4.0

Status: Final

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes
KPI 7: % of local authorities receiving minimum number of scrutiny sessions following ISLA		New KPI	21%	19%	19%	21 Local authorities have their ISLA level assessed so far. 4 of these were assessed as level 1 scrutiny. (This indicator is to be revised)
KPI 8: % services with greater than 90% of respondents happy or very happy with the overall quality of the service they receive	Monitor trend	95% (n = 675)	96% (n = 1116)	94% (n=1208)	96% (n=838)	Over the whole year 2011/12 94% of care services had 90% or more respondents who were satisfied or very satisfied with the overall quality of service.

Version: 4.0

Status: Final

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes												
KPI 9: % of services with 5/6 grades for involving people quality statements	Monitor trend	50% over all themes	50% over all themes (latest grade irrespective of when inspected)	52% over all themes (latest grade irrespective of when inspected)	50% over all themes (latest grade irrespective of when inspected)	<table border="1"> <tr> <td colspan="2">KPI 9: % of services that received a 5 or 6 grade for quality statement Involving People</td> </tr> <tr> <td>Care & Support</td> <td>63%</td> </tr> <tr> <td>Environment</td> <td>56%</td> </tr> <tr> <td>Staffing</td> <td>55%</td> </tr> <tr> <td>Management & Leadership</td> <td>45%</td> </tr> <tr> <td>Over all themes</td> <td>50%</td> </tr> </table> <p>Slight difference in measurement from last year to this.</p>	KPI 9: % of services that received a 5 or 6 grade for quality statement Involving People		Care & Support	63%	Environment	56%	Staffing	55%	Management & Leadership	45%	Over all themes	50%
KPI 9: % of services that received a 5 or 6 grade for quality statement Involving People																		
Care & Support	63%																	
Environment	56%																	
Staffing	55%																	
Management & Leadership	45%																	
Over all themes	50%																	
KPI 10: % of child protection and local authority reports that identify positive multi-agency working		New KPI																

Version: 4.0

Status: Final

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes
<p>KPI 11: % of final regulated care service and child protection inspection reports and ISLA scrutiny reports published within specific timescales</p>	<p>Target % to be set 13 weeks for care services, 14 weeks for CP2 inspections</p>	<p>Draft care service inspection reports (20 days):85% Final care service inspection reports (13 weeks): 97%</p> <p>Final CP2 inspection reports (14 weeks): 100%</p> <p>ISLA and post scrutiny reports: 100%</p>	<p>Draft care service inspection reports (20 days):86% Final care service inspection reports (13 weeks): 96%</p> <p>Final CP2 inspection reports (14 weeks): 100%</p> <p>ISLA and post scrutiny reports: 100%</p>	<p>Draft care service inspection reports (20 days):86% Final care service inspection reports (13 weeks): 95%</p> <p>Final CP2 inspection reports (14 weeks): 100%</p> <p>ISLA and post scrutiny reports: 100%</p>	<p>Draft care service inspection reports (20 days):87% Final care service inspection reports (13 weeks): 95%</p> <p>Final CP2 inspection reports (14 weeks): 100%</p> <p>ISLA and post scrutiny reports: 100%</p>	<p>(4 CP2 reports finished by Care Inspectorate but inspection started in HMIE)</p> <p>16 Scrutiny reports were published on our website between Q1-Q4</p>

Version: 4.0

Status: Final

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes
KPI 12: % of people who use services and their carers who are confident that scrutiny improves the service	Monitor trend	Staff 95% (n = 87) Service users 89% (n = 19)	Staff 94% (n = 396) Service users 84% (n = 156)	Staff 94% (n=611) Service users 84% (n= 205)	Staff 94% (n=809) Service users 83% (n= 433)	This information only covers care service inspections
KPI 13: % of inspections/scrutiny sessions that involve people who use services and their carers		New KPI	138 care service inspections (4%) involved Lay Assessors 100% of scrutiny sessions involved people and their carers.	211 care service inspections (4%) involved Lay Assessors 100% of scrutiny sessions involved people and their carers.	276 care service inspections (4%) involved Lay Assessors 100% of scrutiny sessions involved people and their carers.	

Version: 4.0

Status: *Final*

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes
KPI 14: % of staff sickness absence	To be established	3.45%	4.8%	Short term- 1.8% Long term- 2.5%	Short term- 1.8% Long term- 2.9%	For the year 1 April 2011 to 31 March 2012 the overall percentage was 4.3%, 1.6% was short term sickness and 2.7% was long term sickness
KPI 15: % of efficiency savings achieved	To be established	New KPI	Will not be reported on until Q1 2012/13	Will not be reported on until Q1 2012/13	Will not be reported on until Q1 2012/13	
KPI 16: % of variance from planned budget	+/- 2%	0%	-2.67% (underspend)	Refer to the Resources Committee Report	The projected net budget variance based on February's ledger is an underspend of 4.91%	

Version: 4.0

Status: Final

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes
<p>KPI 17: Composite measure: % of registration and complaints activities completed within specific timescales (complaints acknowledged within 3 days; complaints completed within 28 days; registrations completed within 3 months for childminders and 6 months for other care services)</p>	<p>Not yet agreed</p>	<p>Complaints acknowledged in 3 days: 97% (n = 302) complaints completed within 28 days: 98% (n = 328) CM registered within 3 months: 79% (n= 142) Other services registered within 3 months: 84% (n= 77)</p>	<p>Complaints acknowledged in 3 days: 97% (n = 630) complaints completed within 28 days: 99% (n = 746) CM registered within 3 months: 81% (n= 328) Other services registered within 3 months: 81% (n= 165)</p>	<p>Complaints acknowledged in 3 days: 96% (n=823) Complaints completed within 28 days: 99% (n=1157) CM registered within 3 months : 85% (n=506) Other services registered within 6 months: 88% (n=355)</p>	<p>Complaints acknowledged in 3 days: 97% (n=1202) Complaints completed within 28 days: 99% (n=1586) CM registered within 3 months: 87% (n=686) Other services registered within 6 months: 90% (n=479)</p>	<p>Further work to be undertaken on the potential to combine this into one measure.</p>

Version: 4.0

Status: Final

Date: 06/06/2012

Agenda item 7

Report Number
SP-09-2012

Key Performance Indicator 2011/12	Target	Q1 2011/12	Q2 2011/12	Q3 2011/12	Q4 2011/12	Notes
KPI 18: Memorandum of Understanding agreements in place with relevant bodies and measures identified to review their efficiency in practice	New KPI		Will be reported in Quarter 3	9 MoU's completed as at 31Dec 11	12 MoU's completed as at 31Mar 12	

Version: 4.0

Status: Final

Date: 06/06/2012

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.

8.0 CONCLUSION

The committee is asked to note the performance of the Care Inspectorate against its interim KPIs for 2011/12.