



Business plan 2022-23

Scottish Public Services Ombudsman

**INDEPENDENT
NATIONAL
WHISTLEBLOWING
OFFICER**

People Centred | Improvement Focused



**SCOTTISH
PUBLIC
SERVICES
OMBUDSMAN**

People Centred | Improvement Focused



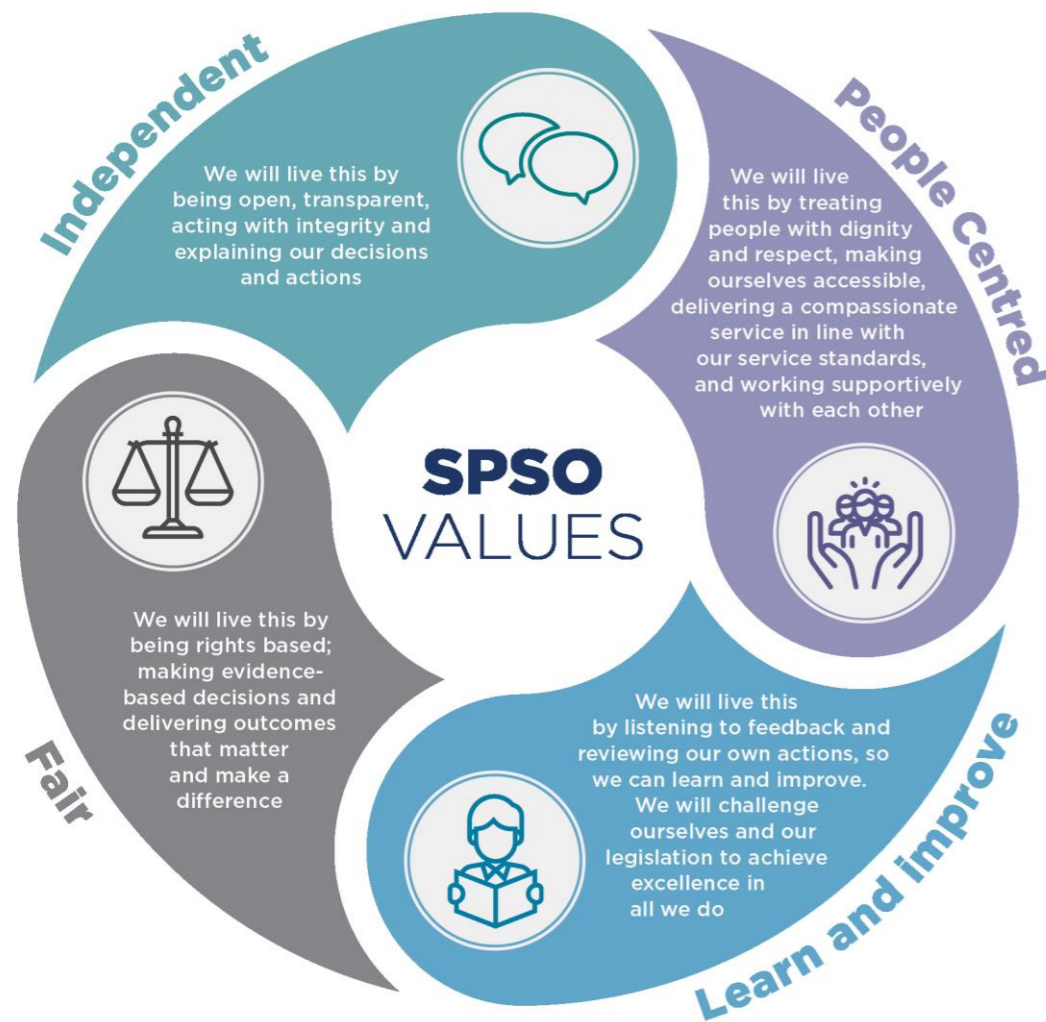
SPSO Business Plan Explanatory Notes

Introduction

This document sets out the Scottish Public Services Ombudsman’s annual business plan for the period from 1 April 2022 to 31 March 2023. It sets out what we will do this year to deliver our strategic vision and aims. It should be read in conjunction with our Strategic Plan 2020-2024.

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| <p>Vision The Scottish Public Services Ombudsman contributes actively and positively to high performing Scottish public services. Recognised for our innovative world-leading approach, we put people and learning at the heart of all we do.</p> | <p>Strategic themes</p> <ul style="list-style-type: none"> • Accessibility • Access to justice • Capacity • Standards |
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Values



SPSO Strategic aims 2020-2024

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| 1 | We will make our own services as accessible as they can be. |
| 2 | We will push for legislative change to enable us to make our services and those of other Scottish public bodies accessible. |
| 3 | We will continue to develop relationships with our stakeholders to both learn from and to contribute to fair, accessible Scottish public services. |
| 4 | We will deliver our statutory functions in line with legislative requirements and our published customer services standards and performance targets. |
| 5 | We will contribute to the development of the wider access to justice environment through engagement with relevant groups and stakeholders such as the UK Access to Justice Council, the Open Government Partnership, and other commissioners and ombudsman services. |
| 6 | We will continue to push for adequate funding for our functions and seek to develop a more sustainable funding model. |
| 7 | We will be acknowledged for having well-trained, properly supported people, who have the tools they need to deliver our services. |
| 8 | We will build or maintain our capacity, financial, human and infrastructure, to implement and deliver our statutory functions. |
| 9 | We will review and develop the support, guidance and training we offer to public bodies, complainers and whistleblowers to enable them to develop their own capacity, in particular the NHS in developing its capacity in respect of whistleblowing. |
| 10 | We will monitor Scottish public bodies’ complaint, Scottish Welfare Fund and Whistleblowing handling, holding them to account for poor performance and giving credit for good performance. |
| 11 | We will develop our capacity to gather and share information to enable us to make informed and beneficial interventions when complaint, whistleblowing and Scottish welfare fund services fall below accepted standards. |
| 12 | We will review the Model Complaints Handling and National Whistleblowing standards, to ensure they remain fit for purpose. |
| 13 | We will contribute to the development and/ or review of other standards and guidance to ensure they deliver services to the standards required. |

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| 1 | Take proactive steps to identify and reduce potential barriers to ensure that our service is accessible to all. |
| 2 | Identify common equality issues (explicit and implicit) within complaints or reviews brought to our office and feed back learning from such cases to all stakeholders. |
| 3 | Ensure that we inform people who are taking forward a complaint or review of their rights and of any available support, and that we encourage public authorities to do the same. |
| 4 | Ensure that we play our part in ensuring that service providers understand their duties to promote equality within their complaints handling and review procedures. |
| 5 | Monitor the diversity of our workforce and supply chain, and take positive steps where under-representation exists. |

Resources

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| Total SPSO budget for 2022-23 is £6,322,000 broken down as follows: | |
| • | Staff costs £5,018K |
| • | Running costs £746K |
| • | Bridgeside House costs £638k management of Bridgeside House for SPSO, SHRC, SBC and CYPSCS) |
| • | Less Total estimated SPSO income (£80,000) |

Commonly used terms

BAU: Business as usual

C&I: Complaints and investigations

CS/ Corp Serv: Corporate Services

Dir-: Director (followed by main operational area, e.g. Dir-C&I)

HoISE: Head of Improvement, Standards and Engagement

INWO: Independent National Whistleblowing Officer Complaints

ISE: Improvement, Standards and Engagement

LT: Leadership team

Omb / SPSO: the Ombudsman

Priority: strategic and business priority

Statutory: delivers a duty SPSO must meet

S/H: high priority to support or enable a statutory duty

High: high strategic or business priority (have a choice but essential to achievement of strategic aims and business delivery)

M: medium strategic or business high priority (have a choice about whether to do)

L: low business priority (desirable but have a choice about whether to do)

PSC: Public Service Complaints

SWF: Scottish Welfare Fund

| No | Activity <i>description of task/ activity/ project</i> | Strategic Theme <i>Select</i> | Type <i>Select</i> | Frequency <i>Select</i> | Start | End | Priority <i>Select</i> | Measure/ KPI/ Reporting | Status <i>Select</i> | Comment/ update <i>E.G.</i> - why not on target/ exceeded - actual achieved - important milestones achieved - if it is a new addition to the plan - policy decisions taken - why discontinued, or carried forward |
|----|---|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|--|-------------------------|--|
| 1 | Case-handling - Advice (provide advice and signposting; and manage Freephone telephone advice service) | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 95% of cases advice stage completed within 5 working days | On target | Q1&2: 100% in 5 days Q3: 94% in 5 days - 1 case over |
| 2 | Case-handling - Initial Assessment (assess suitability and maturity; take action on premature cases) | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 80% of cases closed/ moved to investigation within 30 working days 95% of cases closed/ moved to investigation within 60 working days | Slippage | Q1: 57% IA cases closed in 30 days, 86% closed in 60 days. Q2: 100% IA cases closed in 30 days, 100% closed in 60 days Q3: 73% IA cases closed in 30 days, 100% closed in 60 days |
| 3 | Case-handling - Investigations (including direct investigations and discontinued investigations) | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 90% of investigations completed within 260 working days | Slippage | Q2: 100% closed in 260 days Q3: 0% closed in 260 days - 1 case closed |
| 4 | Case-handling - Recommendations and post closure engagement (follow up on recs and apply SIP as appropriate) | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 95% of recommendations followed up by deadline, and SIP engaged as appropriate | On target | |
| 5 | Develop case-handling guidance for recommendations and post closure activity | Standards | Project | Project defined | 01/04/2022 | 31/09/2022 | H | Guidance agreed and in place. Templates agreed and in use. | Completed | |
| 6 | Ensure INWO guidance and templates are updated regularly and in line with evolving case handling practices | Standards | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | - Improvements identified through casework and QA - Guidance docs updated to reflect practices - LT informed of changes via quarterly reporting | On target | |
| 7 | Resourcing: Monitor case volumes and complexity to identify as soon as case numbers indicate the need for additional resourcing; take steps to seek resources and then recruit as appropriate | Capacity | BAU | Monthly | 01/04/2022 | 31/03/2023 | S/H | Adequate resources to complete statutory functions to time and quality. Report to LT through other reports | On target | 11/1/23: Decision made to confirm permanent staffing for team, based on developments in caseload over Q3. |
| 8 | Maintain and promote professional development of staff and ensure team is appropriately resourced and skilled. | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | PDPs and team training plan in place | On target | |
| 9 | Conduct a review of first year of INWO Standards and INWO reviews | Standards | Project | Project defined | 01/06/2022 | 31/09/2022 | H | - Draw on quarterly reports - Report on evidence of performance from boards - Identify recommendations for improvements to application of Standards and INWO processes | Slippage | This review is drawing on annual reports from boards, which have not been available until September in many instances. Review of this material is progressing. (11/1/23) |
| 10 | Performance standards - monitor performance against service standards using internal and stakeholder feedback and CSC, and identify and implement improvements | Standards | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | Quarterly report to LT as part of business plan update, including learning, recs and details of action taken and planned | On target | |
| 11 | Engage with relevant stakeholders on service improvements to INWO guidance to maximise impact | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | Report on activity to LT, including updates to our procedure (with appropriate LT approval) | On target | |
| 12 | Engage with ISE colleagues on intelligence on effective implementation of the Standards, supporting and advocating good practice | Standards | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - See ISE BP - Updates and support for ISE work | On target | |
| 13 | Engage with other regulators on case-work, to ensure effective handling of high risk/ overlapping cases and effective signposting | Standards | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | - Quarterly meetings with regulators - Case specific engagement where appropriate - report of activity to LT | On target | |
| 14 | Share casework intelligence with ISE colleagues, feeding into SHICG and gaining feedback as appropriate to our casework | Standards | BAU | Monthly | 01/04/2022 | 31/03/2023 | H | - Provide bimonthly casework updates for SHICG - Share relevant intelligence of themes and trends | On target | |
| 15 | Monitor uptake of training modules and amend based on feedback | Capacity | BAU | Quarterly | 01/04/2022 | 31/03/2023 | M | - Monthly report to LT - Quarterly report to LT | On target | |
| 16 | Produce content for INWO section of the Annual Report and Accounts | Access to justice | BAU | Annual | 01/04/2022 | 31/06/22 | S | AR performance content | Completed | |

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|----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|---|-----------------------------|---|
| 17 | Develop a 'debrief' approach to customer service feedback on closed investigations to gain feedback from WB and BUJ | Access to justice | Project | Project defined | 01/04/2022 | 31/06/22 | H | - Gain LT sign off on defined approach | Completed | |
| 18 | Develop targeted approach to customer service feedback on advice and initial assessment , excluding signposting | Access to justice | Project | Project defined | 01/04/2022 | 31/06/22 | M | - Gain LT sign off on defined approach | Completed | |
| 19 | Implement customer service feedback processes for investigations, initial assessment and advice | Access to justice | BAU | Continuous | 01/07/2022 | 31/03/2023 | M | - Implement customer service feedback system - Analyse feedback to identify service improvements - Report learning and improvements to LT | Slippage | While mechanisms are now in place for gaining feedback, there has been limited engagement from complainants (re advice calls) and limited number of cases (re monitored referrals) in Q3, so feedback has not enabled learning and improvement yet. (11/1/23) |
| 20 | Conduct peer review process for internal development of advice service - based on team development needs | Standards | Project | Quarterly | 01/04/2022 | 31/03/2023 | M | - Implement peer review process - Analyse feedback to identify service improvements - Report learning and improvements to LT | On target | |
| 21 | Review Workpro functioning, to develop plans for improvements to take forward in 2023-2024 | Capacity | Project | Project defined | 01/01/2023 | 31/03/2023 | M | - Engage with team to identify improvements - Liaise with LT re scale of changes suggested - Liaise with ICT to take forward changes | C/F to next year | This project has not been implemented. ICT have been held back by other Workpro changes, so not able to take forward INWO review. Next step: establish appropriate timeline with ICT for taking this forward; possible slippage to 23-24 BP. |
| 22 | Work with HR to develop safety guidance for INWO site visits | Capacity | Project | Project defined | 01/04/2022 | 31/06/2022 | M | - Provide input to HR guidance - Gain LT sign off on guidance | C/F to next year | Will require significant input from HR. Progress has been slowed by CR caseload and lack of cases with prospect of site visit. (11/1/23) |
| 23 | Work with HR to develop new SPSO whistleblowing policy | Standards | Project | Project defined | 01/04/2022 | 31/09/2022 | M | - Provide input to HR guidance - Gain LT sign off on guidance | Slippage | Q2: Draft in progress. Timetable including consultation indicates policy finalised in Q4. (4/10/22) Q3: Further delays in drafting mean delays to final publication likely, but draft ready for consultation by end March '23. |
| 24 | If case volumes allow: Increase promotion of INWO and work with ISE and board | Standards | Project | Project defined | 01/04/2022 | 31/03/2023 | L | TBC | In-year addition: on target | Working with ISE on an INWO engagement project for the year. |

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|----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|---|-------------------------|--|
| 1 | Case-handling - Advice (assess suitability and maturity; provide advice and signposting; manage Freephone telephone advice service; and production of complaint files) | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | PI1 95% of cases where advice stage was completed within 5 days | On target | |
| 2 | Case-handling - Early resolution, Investigations Level 1 & 2 | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | PI2-30 50% of cases where ER stage was completed within 30 days PI2 95% of cases where ER stage was completed within 80 days | Slippage | Due to older cases from last year now being progressed and closed. This is likely to continue into Q4 of this year. |
| 3 | Case-handling - Investigations Levels 1-4 | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | PI3-130 20% of cases where Investigation stage was completed within 130 days PI3-195 50% of cases where Investigation stage was completed within 195 days PI3 85% of cases where Investigation stage was completed within 260 days | Slippage | Due to older cases from last year now being progressed and closed. This is likely to continue into Q4 of this year. |
| 4 | Information sharing casework related intelligence to relevant sector groups e.g.. Scottish Water Output Monitoring Group, HIS Sharing Intelligence Group, Strategic Scrutiny Group | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | M | - input information/ papers to LT - attendance at meetings - feedback to LT | On target | |
| 5 | Ombudsman groups: contribute to OA (and other) special interest groups operating in the sector to share good practice and learning and development | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | M | - feedback for SPSO specific items - OA published minutes - ad hoc reports and recommendations as required | Completed | Chaired OA FC Interest Group - June & December 2022. Head of joined OA Casework interest group |
| 6 | Service standards - regularly review our communications with complainants about timescales and delays to our service to complainants and bujs through the process to ensure it accurately reflects what is happening in practice | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | Improved communication with complainants. | On target | Allocation letters regularly updated to ensure correct, up to date information being communicated regarding allocation waiting times |
| 7 | Resourcing: monitor and plan recruitment to maintain appropriate level of staff resources for C&I | Capacity | BAU | Monthly | 01/04/2022 | 31/03/2023 | S/H | - Achievement of KPIs - Carry forward of cases at year end in line with target of less than 1000 | On target | Further CR recruitment exercise completed in Q1 - achieved full CR capacity in Q2 |
| 8 | Manage, monitor and report on the performance of the Service Improvement Forum | Standards | BAU | Quarterly | 01/04/2022 | 31/03/2023 | M | Report of actions to Casework Performance Management Meeting | On target | The SIF have met May, June, Oct, Nov, Dec, 2022. Updates on meetings and improvements are given at AS, PSC Managers and QCPM mtgs. |
| 9 | Close monitoring of allocation pool management, building on 21-22 project to identify further strategies to reduce timescales | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | Regular reporting and review through PSC monthly meetings to monitor and ensure quarterly improvements | On target | Unallocated pool project commenced in Q1 and making good progress working with new CRs |
| 10 | Ongoing roll out of workpro training activites to ensure all users are familiar with requirements and functions | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | Regular training and updates throughout the year | On target | Workpro training delivered in Q1 |
| 11 | Case handling guidance: consideration of developing guidance regarding joint working of difficult cases, including multiple complaints from a single complainant | Capacity | Project | Project defined | 01/09/2022 | 31/03/2023 | M | Guidance prepared and introduced | On target | First draft of guidance completed. |
| 12 | Review of allocation process from an operational and staff wellbeing perspective | Capacity | Project | Project defined | 01/04/2022 | 01/09/2022 | H | Review complete with recommendations as appropriate | Completed | Allocation process re-drafted. Circulated to TU and comments incorporaed. Circulated to staff. No comments requiring amendment. Finalised January 2023 |
| 13 | Develop a unique complaint form for NHS complaints – addressing common issues with the generic form (incl. complaints covering more than one health service and advice on Significant Adverse Event Reviews). | Accessibility | Project | Project defined | 01/04/2022 | 01/12/2022 | M | Scoping complete and new form developed. | On target | Form has been developed in conjunction with Health COP. PASS 'user' comments rcd. Form will go live by end of Q4. |
| 14 | Case handling guidance: Consideration of developing resolutions approach and guidance to include mediation style approaches | Access to justice | Project | Project defined | 01/07/2022 | 31/03/2023 | H | Presentaiton of business case to LT | Slippage | Re-scheduled for Q4 due to ongoing focus on reducing allocation pool waiting times/size |

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|----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|--|-------------------------------|--|
| 15 | Decision making: review the proportionality templates and proportionality wording tool to ensure that we are communicating proportionality decisions with assurance, clarity and empathy. | Access to justice | Project | Project defined | 01/04/2022 | 01/09/2022 | H | Templates and wording tool reviewed and impact monitored | Slippage | Was put on hold pending outcome of current JR application but aiming to complete by end Q4 |
| 16 | Service standards - to ensure consistency and quality of telephone contact, develop QA criteria and conduct a QA of implementation of refreshed telephone guidance in Q3 | Accessibility | Project | Project defined | 01/07/2022 | 01/12/2022 | H | Successful completion of QA report and findings | On target | QA questions developed and agreed with PSC Managers QA exercise to be conducted Q4. |
| 17 | Progress recommendations from Prison Health Premature Complaints Study - present findings to NCPAS - improve SPSO stationery to support prisoners in progressing their complaints - research options for advocacy and support in SPS establishments to improve A&G signposting knowledge | Accessibility | Project | Project defined | 01/04/2022 | 01/09/2022 | M | recommendations agreed with NCPAS and implemented. SPSO internal improvements implemented. Info obtained from SPS and list compiled of signposting orgs. | On target | Meeting to discuss findings with NCPAS members held on 11 August. CSA colleagues to take this work forward. Researching advocacy options in prison establishments completed. |
| 18 | Expand A&G use of workpro - capture data on new closure codes and complaint handling marker - improve the daily movement of cases to/from DCRs for assessment using workpro | Access to justice | BAU | Continuous | 01/04/2022 | 01/09/2022 | M | Enhanced stats reported to QCPM mtg. New system implemented to efficiently transfer cases electronically to/from A&G/DCR. | C/F to next year | A&G closure codes improved and new workpro reports set up for data capture. Paper approved by LT for workpro development by CAS to improve daily movement of cases to/from DCRs. |
| 19 | Introduce IVR options on 0800 advice line | Capacity | BAU | Continuous | 01/07/2022 | 01/07/2022 | M | Manageable number of advice calls received for A&G to respond to within hybrid hours of operation. | Completed | |
| 20 | Review paper complaint form and complainant checklist to ensure that those choosing to communicate with SPSO by post are not digitally excluded | Accessibility | Project | Project defined | 01/10/2022 | 31/03/2023 | M | Complete review, agree changes with comms and reprint materials. | Completed | |
| 21 | Build upon existing mechanisms (such as engagement policy) to support staff to manage, debrief and learn from handling difficult telephone calls | Capacity | Project | Project defined | 01/04/2022 | 01/09/2022 | H | Produce tips for managing calls, debriefing guidance, and telephone conversation template. Add in as a standing item to team agendas | On target | Further training and guidance issued to Inv 1 & 2 staff in Q1 |
| 22 | Carry out a sample analysis of cases post DCR to identify whether there are quick resolution or proportionality cases that could be triaged and worked outwith the unallocated pool | Capacity | Project | Project defined | 01/04/2022 | 31/03/2023 | H | Increased identification of resolution and send back cases for quick closure | On target | |
| 23 | Review our process and communications to ensure they adequately reflect a resolutions based approach to our work | Capacity | Project | Project defined | 01/07/2022 | 31/03/2023 | M | Increased use of resolution v proportionality closures | On target | on line complaint form reviewed and amended; template letters (proportionality and satisfaction and apology letters) |
| 24 | Draft SPSO IDEA Framework | Accessibility | Project | Project defined | 01/06/2022 | 01/03/2023 | M | Approval by LT | On target | This paper was part drafted 2020/21 and requires further work by A&G Manager. |
| 25 | Explore option of issuing telephone decisions at early stages of process including legal and service issues | Capacity | Project | Project defined | 01/10/2022 | 31/03/2023 | | | In-year addition: unallocated | |
| 26 | Explore option of creating CR bubbles to provide additional casework support to CRs | Capacity | Project | Project defined | 01/10/2022 | 31/03/2023 | | | In-year addition: unallocated | |

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|----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|--|-------------------------|--|
| 1 | Case-handling times - SWF Reviews of Crisis Grants | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 95% of cases closed or progressed in 1 working day or fewer (from receiving all information) | On target | Achieved in 100% of cases in Q3 |
| 2 | Case-handling times - SWF Reviews of Community Care Grants | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 95% of cases closed or progressed in 21 working days or fewer (from receiving all information) | On target | Achieved in 98% of cases in Q3 |
| 3 | Case-handling times - SWF Reviews of Self-Isolation Support Grants | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 95% of cases closed or progressed in 1 working day or fewer (from receiving all information) | Slippage | Achieved in 90% of cases in Q3 from the point we had the information needed to make our decision, although it should be noted that there were delays of allocating cases due to a backlog of cases accumulating from Q2. There were significant resourcing difficulties concerning SIGs. |
| 4 | Case-handling process SWF - monitor practice, review and update case handling guidance, and disseminate through updates and training | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S/H | Report to LT quarterly confirming learning captured and action taken and planned | Completed | Approved by LT in December 2022 and final formatting amendments are being carried out prior to publication. |
| 5 | Reconsiderations | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | H | 95% of decisions are correct, Quarterly reporting to LT | On target | Decision correct in 100% of cases in Q3. In one case, where the reconsideration was requested by the council, the finding category and content was amended. |
| 6 | Monitor SG SWF Guidance, provide feedback and engage in review | Standards | BAU | As required | 01/04/2022 | 31/03/2023 | S/H | Ad hoc updates and annual report to LT | On target | Continuing to track feedback concerning the guidance, and to raise emerging such as crisis grant calculations and how to calculate low income. |
| 7 | Produce content for SWF section of annual report | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | S | Published Annual Report | Completed | |
| 8 | Resourcing: monitor, plan and arrange recruitment to maintain appropriate level of staff resources for SWF | Capacity | BAU | Monthly | 01/04/2022 | 31/03/2023 | H | Achievement of KPIs | On target | Recruitment for two permanent CR posts completed in October 2022. |
| 9 | Performance reporting: Service standards - monitor performance against service standards using internal and stakeholder feedback and identify and implement improvements | Access to justice | BAU | Quarterly | 01/04/2022 | 31/03/2023 | M | - Quarterly report to LT as part of business plan update | On target | |
| 10 | Maintain effective engagement with stakeholders via appropriate channels, working with ISE | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | M | - Quarterly report to LT as part of business plan update - Consider as part of C&E strategy once available. | On target | Five training sessions delivered to individual LAs in Q3. Suggested wording for CGs circulated in December 2022. Survey of LAs completed to assess training needs and demand for SPSO performance information. |
| 11 | Produce SWF text for monthly commentary as well as additional comms materials as and when required. | Access to justice | BAU | Monthly | 01/04/2022 | 31/03/2023 | M | - monthly content to ISE | On target | |
| 12 | Review QA results (casework and telephone) and implement learning/ amend process as required. | Access to justice | BAU | Quarterly | 01/04/2022 | 31/03/2023 | M | - report of findings and recommendations to LT | Not started | Scheduled activity for Q3 or Q4 |
| 13 | Maintain and promote professional development of staff and ensure team is appropriately resourced and skilled. | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | Achievement of SWF function and business plan objectives. | On target | Away from casework afternoon held in September 2022. |
| 14 | Assess customer experience of SPSO SWF quality of service delivery | Accessibility | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | - report of findings and recommendations to LT | Slippage | Customer survey data gathered in Q2 |
| 15 | Review the decision letter to remove repetition and unnecessary content | Accessibility | Project | Project defined | 01/04/2022 | 31/03/2022 | M | - Report and recommendations to LT | Completed | Completed |
| 16 | Review our Timesaving Tool and internal template documents to ensure accuracy and maximise efficiency. | Access to justice | Project | Annual | 01/04/2022 | 31/01/2023 | M | - Quarterly report to LT as part of business plan update | Slippage | Content revised and in the final stages of re-formatting. |

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|----|---|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|--|-----------------------------|--|
| 17 | Further develop our knowledge and application of SIP to handle recurring issues where councils do not amend their practice following our feedback. Leaflet to be produced by collaborating with comms outlining process for councils. | Standards | Project | Continuous | 01/04/2022 | 31/03/2023 | M | - Quarterly report to LT as part of business plan update | On target | Seven new issues escalated at level one during Q3 and one issue raised at level two. Met with one LA to discuss SIP and arrange support via training. |
| 18 | Taking into account results of LA survey, consider what realistic actions we can take to support councils to improve their practice. | Standards | Project | Project defined | 01/04/2022 | 31/03/2023 | M | - Quarterly report to LT as part of business plan update | On target | Mini survey of council's training needs carried out and training priorities agreed. |
| 19 | Review documents and file plan within eRDM to make them more accessible to staff | Access to justice | Project | Project defined | 01/04/2022 | 31/03/2023 | M | - Quarterly report to LT as part of business plan update | Completed | TA produced new file plan to ease of access |
| 20 | Develop a shared space where process and policy updates can be collated for ease of reference for case reviewers | Access to justice | Project | Project defined | 01/04/2022 | 31/03/2023 | m | - Quarterly report to LT as part of business plan update | On target | Tracker document produced and circulated to collate key documents for ease of reference. |
| 21 | Represent SPSO views and perspective as part of the advisory group for the ongoing SWF Review | Access to justice | BAU | Project defined | 01/04/022 | 31/03/2023 | S | Ad hoc updates and annual report to LT | In-year addition: on target | Provided SPSO's comments on draft report in December 2022 |

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|-----|---|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|---|-------------------------|--|
| 1 | BH Handbook: Health, safety, security - review and update with Hybrid working, disseminate through updates and training, and monitor practice. | Access to justice | BAU | Annual | 01/01/2023 | 31/03/2023 | S | - LAW review report to LT | On target | Final update after Hybrid working confirmed |
| 2 | BH Handbook: MoU - review and update, disseminate through updates and training, and monitor practice. | Access to justice | BAU | Annual | 01/01/2023 | 31/03/2023 | S | - Review undertaken and signed off by BHMG | Completed | |
| 3 | BH: Facilities - ongoing management of maintenance plans including statutory, and preventative, resolve day to day maintenance issues, prioritise & fixed efficiency, liaise with landlord, trade engineers and contractors. Ensure good carbon management practices maintained, supplies and equipment maintained, | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Bridgeside House facilities maintained - prioritised preventative maintenance actioned | On target | Updated |
| 4 | BH: Health, Safety and Security (H&S service) - promoting health, safety & security with on-going management in Bridgeside House working environment. Provide ongoing effective health and safety service and advice to staff in office, WFH and hybrid. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | -Provide quarterly update -H&S group meeting deliver on actions -Deliver H&S aspects of work from home policy | On target | updated |
| 5 | BH: Health, Safety and Security (Hybrid Working) - review first aider requirements in building consider and review fire warden requirements for a hybrid working building with shared option considerations. | Access to justice | BAU | Quarterly | 01/04/2022 | 01/10/2022 | S | New Building First Aid arrangements and Fire Warden management arrangements in place | On target | First aiders been updted Final update on fire wardens in Q4 |
| 6 | BH: Health, Safety and Security (management) - Ensuring statutory regulations are complied with records maintained for legal duties including - fire safety training, fire tests, fire drills, qualified first aiders, legionella risks controlled, emergency lighting, electrical appliance testing. Office and Home Risk Assessment are reviewed inline with workplace audits including security management. External audit outcomes, actions and other reports/inspections. Testing business continuity plans (BCP) in line with health and safety | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Annual H&S Assurance Statement to SPSO - Training and updates disseminated to all staff - Low residual risk in operational risk register - 2 fire drills annually evacuate in 3 minutes - Pass annual H&S audit | On target | Updated |
| 7 | BH: Health, Safety and Security (staff training) - new staff H&S inductions; annual H&S+ S staff questionnaire, Annual Display Screen Equipment Assessment (DSE) for Working from Home (WFH), Ongoing Awareness training for staff and managers for home, Hybrid & office work environments | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | S | - All new staff completed H&S+S Induction - Annual H&S + S training - Annual DSE training | On target | annual H&S and DSE training in Q4 |
| 8 | BH: Mail & delivery management - provide efficient service for pick-up of all mail & deliveries, update and maintain courier procedures in hybrid working. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - secure & timely mail support services | On target | updated |
| 9 | BH: Managed Contracts - ongoing management of contracts and contractors of Bridgeside House including acting as first point of contact for suppliers, manage lease, cleaning, waste, security while working with procurement and finance to achieve best value money (BVM) and meets sustainable procurement practices. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - contracts delivering on service expectations | On target | completed windows, window + H&S contracts with BVM |
| 10 | BH: Shared Area Management - providing a well-coordinated Bridgeside House shared facility service for three office holders, ensuring the shared areas meet the requirements of the users including shared meeting rooms, booking system, AV & Hybrid technology, supporting events, monitoring costs and billing, Health and Safety security coordination. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - shared space, AV & equipment requirements managed fairly and rooms fit-for-purpose | On target | Updated |
| 11 | Climate change duties: CCAT actions - Implement actions from plan; working towards 2030 target of Net Zero. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Action plan implemented and reported in Climate Change Duties report | On target | Finalised in Q4 |
| 12 | Climate change duties: monitor primary energy usage and waste management | Access to justice | BAU | Monthly | 01/04/2022 | 31/03/2023 | S | - Continued reduction in our Baseline carbon footprint (2015/16 72 tCO2e) | On target | 2021-22 - 2020/21 - 51.2 tCO2e 2019/20 - 45.4 tCO2e 2018/19 - 54.2 tCO2e (3/4 Melville St + 1/4 BH) 2017/18 - 59.9 tCO2e 2016/17 - 71.0 tCO2e |
| 13 | Climate change duties: produce and publish Climate Change Annual Report (including discharging duties under section 32 (1)(a) of the PSR Scotland Act 2010) | Access to justice | BAU | Annual | 01/04/2022 | 30/09/2022 | S | - Published annual report | Completed | Submitted November 2022 and published on the SPSO website. Audited by internal auditor - result: STRONG. |
| 14 | Climate change duties: produce and publish Environment, Sustainability and Biodiversity Annual Report | Access to justice | BAU | Annual | 01/04/2022 | 30/09/2022 | S | - Published annual report | Completed | Published on SPSO website in November 2022. Figures checked by internal auditor. |
| 156 | Decision Review: Review the literature provided to complainants/BUJS about the review process | Access to justice | Project | Project defined | 01/10/2022 | 01/03/2022 | M | Project to review review literature that is sent to complainants and BUJS. | On target | ADELE TO UPDATE - removed reference to JR in leaflets etc |
| 15 | Decision Review: carry out decision reviews in a timely manner | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | 40% in 50 working days, 95% in 90 working days | Slippage | Meeting 90 day target, but not 50 day target due to decision to target limited resource. Additional resource been added to team from Q4 onwards |

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|----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|--|-------------------------|--|
| 16 | Decision Review: review the feedback provided in Review Requests to CRS | Access to Justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | To be discussed how this is recorded as part of the review. draft issued to SBC | C/F to next year | C/f as specific project in Q1 23-24 |
| 17 | Finance: Annual publications - Statements of Expenditure and Contract Register - SBC shared service - draft the statements of expenditure and register for the SBC to publish | Access to justice | BAU | Annual | 01/04/2022 | 01/10/2022 | S | | On target | |
| 18 | Finance: Annual Budget BH - plan and prepare submission for SPCB, including resource planning, staff and non-staff; profile approved budget | Access to justice | BAU | Annual | 01/07/2022 | 30/09/2022 | S | - Annual budget submission, signed off by LT | Completed | |
| 19 | Finance: Annual Budget SPSO - plan and prepare submission for SPCB, including resource planning, staff and non-staff; profile approved budget | Access to justice | BAU | Annual | 01/07/2022 | 30/09/2022 | S | - Annual budget submission, signed off by LT | On target | |
| 20 | Finance: Annual publications - Statements of Expenditure and Contract Register - SPSO (including BH shared service) - produce and publish under Section 31 of the PSR (Scotland) Act 2010, and details of contractors | Access to justice | BAU | Annual | 01/04/2022 | 01/10/2022 | S | - Published annual report | On target | |
| 21 | Finance: Audit, External - SBC shared service - Prepare and provide payroll, pension, staff and contractor information - provide evidence to External Auditor in good time | Access to justice | BAU | Annual | 01/04/2022 | 01/07/2022 | S | Provide HR information in line with agreed dates | Completed | Audit data and information supplied in Q1 |
| 22 | Finance: Audit, External - SBC shared service - prepare and provide all SBC financial statements to External Auditors; | Access to justice | BAU | Annual | 01/04/2022 | 01/07/2022 | S | Provide financial statements and supporting evidence in line with agreed dates - External Audit Report | Completed | |
| 23 | Finance: Audit, External - SPSO Annual report and Financial Statements (including BH shared service) - Prepare and provide payroll, pension, staff and contractor information - provide evidence to External Auditor in good time | Access to justice | BAU | Annual | 01/04/2022 | 01/07/2022 | S | Provide HR information in line with agreed dates | Completed | Audit data and information supplied in Q1 |
| 24 | Finance: Audit, External - SPSO Annual report and Financial Statements (including BH shared service) - prepare contributors, review requirements, coordinate contributions and timelines for the three sections - Coordinate the provision of information and evidence to support the performance reporting | Access to justice | BAU | Annual | 01/04/2022 | 30/11/2022 | S | Draft Annual Report and Accounts provided to Auditor and Ombudsman in good time | Completed | Delayed by Auditor to Sep fieldwork and Nov sign-off due to resourcing issues |
| 25 | Finance: Audit, External - SPSO Annual report and Financial Statements (including BH shared service) - agree annual external audit plan with auditors; - provide information and access to External Auditors; - prepare fully audited Financial and Governance Statements for SPSO Annual Report and Accounts ((including discharging duties under section 32 (1)(b) of the PSR (Scotland) Act 2010) - including Trade Union Publication of Facility Time Data Regulations Reporting | Access to justice | BAU | Annual | 01/04/2022 | 30/11/2022 | S | - Agreed External Audit annual plan - External Audit Report | Completed | Delayed by Auditor to Sep fieldwork and Nov sign-off due to resourcing issues |
| 26 | Finance: Audit, External - SPSO Annual report and Financial Statements (including BH shared service) - review the requirements in relation to Climate Change Financial Disclosures that will be mandatory by 2022 | Access to justice | BAU | Annual | 01/04/2022 | 30/11/2022 | S | - Agreed External Audit annual plan - External Audit Report | Completed | |
| 27 | Finance: Audit, Internal - produce, coordinate activities and deliver Internal Audit Plan | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | - Internal Audit Plan, signed off by LT - Internal Audit reports to LT and AAB, accompanied by Dir-CS responses to any recommendations | On target | |
| 28 | Finance: Expenditure - SBC shared service - monitor and manage expenditure against budget plan and report to SBC | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | Performance report to SBC on service provided | On target | |
| 29 | Finance: Expenditure - SBC shared service - pay invoices against approved orders and process payment of creditors | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 100% of undisputed invoices paid within 30 working days Reported in quarterly to LT | On target | 10 working days: Q1 - 30 working days: Q1 - |
| 30 | Finance: Expenditure - SPSO (including BH shared service) - pay invoices against approved orders and process payment of creditors | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | 100% of undisputed invoices paid within 30 working days Reported in quarterly to LT | On target | 10 working days: Q1 - 86% 30 working days: Q1 - 100% |
| 31 | Finance: Expenditure - SPSO (including BH shared service) - monitor and manage expenditure against budget plan | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - 5% variance: budget to actual spend at year end - monthly spend against budget statement to LT with recommendations - Reported in Annual Report and Accounts | On target | |
| 32 | Finance: Income - SPSO (including BH shared service) - issue and monitor receipt of payment for all Training Unit and ad hoc income | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | - all income received in year | On target | |

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|----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|---|-------------------------|--|
| 33 | Finance: Procurement - consumables - SBC shared service - procure and manage office stock, travel, accommodation arrangements and support tender processes, ensuring SPSO procurement policy is followed. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Published current contract list | On target | |
| 34 | Finance: Procurement - consumables - SPSO (including BH shared service) - procure and manage office stock, travel, accommodation arrangements and support tender processes, ensuring SPSO procurement policy is followed. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Published current contract list | On target | |
| 35 | Finance: Procurement - ICT - SBC shared service - procure and manage ICT hardware requirements, including tracking and future planning for replacement equipment. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - staff have suitable equipment to carry out their roles. | On target | |
| 36 | Finance: Procurement - ICT - SPSO (including BH shared service) - procure and manage ICT hardware requirements, including tracking and future planning for replacement equipment. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - staff have suitable equipment to carry out their roles. | On target | |
| 37 | Finance: Procurement - SPSO professional advice - procure and manage contracts for services and professional advice ensuring best value for money | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Published current contract list | On target | |
| 38 | Governance: Business plan - coordinate and produce annual plan | Access to justice | BAU | Annual | 01/01/2023 | 31/03/2023 | H | - Published business plan | Completed | |
| 39 | Governance: Business plan - coordinate quarterly update and publication | Access to justice | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | - Updated plan republished quarterly | On target | |
| 40 | Governance: Incident register - record and report all ICT incidents in line with the Risk and Incident policy and data breach procedures | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | S | - Effective incident management - quarterly updates to Leadership Team | On target | All incidents logged and reported. |
| 41 | Governance: Risk - Business Continuity Plan - review and update annually, undertake tests with IRT | Capacity | BAU | Annual | 01/01/2023 | 31/03/2023 | H | - Effective risk management | On target | |
| 42 | Governance: Risk - strategic and operations registers - prepare annually in line with business planning process | Capacity | BAU | Annual | 01/04/2022 | 31/03/2023 | H | - Effective risk management | Completed | |
| 43 | Governance: Risk - strategic and operations risk registers - coordinate regular reviews, update, and publish strategic risk register. | Access to justice | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | - Effective risk management | On target | |
| 44 | Governance: SBC Shared Service: Provide a service performance report to SBC for HR, ICT, Governance activities provided | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | Performance report to SBC on service provided | On target | |
| 45 | Governance: Secretariat - provide secretariat to Advisory Audit Board and Leadership Team | Access to justice | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | - Annual meeting schedule planned and issued - Papers prepared and issued at least one week prior to meeting - Declarations of interest published | On target | |
| 46 | HR: Corporate Social Responsibility - Maintain Living Wage status | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | H | - Annual accreditation with Living Wage Foundation - Annual pay negotiations with trade union | Completed | Annual pay negotiations concluded in Q1 and all salaries are paid at a higher rate than the current Real Living Wage (above £9.90 per hour) |
| 47 | HR: Equalities and Human Rights - monitor, report and review practice | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | S | Include in annual HR report | On target | Equalities, Diversity and Inclusion report and recommendations completed in Q1. Ongoing monitoring and reviewing of practice |
| 48 | Service Standards: Equalities and Human Rights - Organise a celebration of International Woman's Day | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | L | - Annual events planned for All Staff attendance | Completed | Presentation delivered by SPSO's Director and successful charity collection of women's workwear for Smart Works. |
| 49 | HR: Health and wellbeing - Health and Wellbeing accreditation | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | Achieve and maintain Healthy Working Lives Accreditation | Discontinued | Healthy Working Lives accreditaion programme has ben discontinued by NHS Scotland |
| 50 | HR: Health and wellbeing - Implement well-being strategy and plan | Capacity | BAU | Annual | 01/04/2022 | 31/03/2023 | H | - Up to date wellbeing action plan - Quarterly HR reporting - % lost days due to sickness to not exceed PS average | On target | |
| 51 | HR: Health and wellbeing - Monitor and report on the activities and achievements of the Wellbeing Action Group. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Continue to encourage support from colleagues and deliver objectives of group. - Report summary of activities in the quarterly HR report | On target | |
| 52 | HR: Learning and Development - Annual learning and professional development plan - annual manager training | Capacity | BAU | Annual | 01/04/2022 | 31/03/2023 | M | Plan and deliver annual manager training sessions | On target | 2 x Spotlight training sessions delivered in this business year with 2 further sessions planned |
| 53 | HR: Learning and development - Annual learning and professional development plan - prepare and fully resource plan, including specialist technical training for different staff groups as requested | Capacity | BAU | Annual | 01/04/2022 | 31/03/2023 | M | - PDPs completed with analysis, survey and IIP action plan incorporated - Plan shared with all staff | On target | L&D activites planned up to Q4 |
| 54 | HR: Learning and development - Annual learning and professional development plan -monitor progress against plan, particularly resources. | Capacity | BAU | Quarterly | 01/04/2022 | 31/03/2023 | M | - Well skilled workforce - Quarterly report to LT | On target | |

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|----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|--|-------------------------|---|
| 55 | HR: Payroll SBC - manage and maintain payroll | Access to justice | BAU | Monthly | 01/04/2022 | 31/03/2023 | S | - Staff paid promptly and correctly - Successfully audited accounts | On target | |
| 56 | HR: Payroll SPSO - manage and maintain payroll | Access to justice | BAU | Monthly | 01/04/2022 | 31/03/2023 | S | - Staff paid promptly and correctly - Successfully audited accounts | On target | |
| 57 | HR: provide the organisation with an effective HR service | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Quarterly and annual HR stats report to LT of the HR service, including workforce composition, absence management, staff performance management (summary level not personal information) | On target | |
| 58 | HR: Resourcing - monitor, plan and recruit to maintain appropriate level of staff resource | Capacity | BAU | Monthly | 01/04/2022 | 31/03/2023 | H | - Delivery of CS statutory duties - Achievement of KPIs | On target | |
| 59 | HR: SBC - provide the organisation with an effective HR service | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Enquiries and time recording log - Service complaints performance | On target | |
| 60 | HR: Strategy - Annual staff survey and accompanying action plan | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | H | - Analysis of survey and action plan produced for business planning. | On target | Staff views being analysed and high level feedback given to staff in Q1. Full report to be completed in Q2 |
| 61 | HR: Strategy - Implement annual IIP assessment and agree actions | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | H | - IIP mid-cycle reviews and reports completed and action plan produced for business planning. | On target | |
| 62 | ICT: Applications - Ad hoc - ensure appropriate software applications are available and fit for purpose | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Appropriate applications available for staff to complete their roles and responsibilities | On target | |
| 63 | ICT: Applications - Case-handling system (Workpro) - manage the maintenance and enhancement of application and casework EDMS | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Case-handling application up-to-date and meeting business and information management requirements | Slippage | Q3- completed initial testing of Workpro Refactoring Calculations project. Due to be rolled out in Q4. |
| 64 | ICT: Applications - Communication tools, including video conferencing - ensure appropriate software applications are available and fit for purpose | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Appropriate communication channels available for staff to complete their roles and responsibilities | On target | |
| 65 | ICT: Applications - Document management (eRDM) - manage the maintenance and enhancement of non-casework electronic document file system | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - EDMS meeting information management requirements | On target | Upgrade to eRDM rolled out in Q3. |
| 66 | ICT: Applications - Document sharing (Connect) - ensure application is fully embedded and fit for purpose | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Appropriate document sharing applications available for staff to complete their roles and responsibilities | On target | Q3 - trained 2 new IMSOs |
| 67 | ICT: Applications - Performance reporting - support the development of statistical reports from case-handling system, providing liaison with contractor. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | - SQL Report builder and data bases are correct and working, all issues reported to Contractor on time | Slippage | Q3 - delays of Workpro Refactoring Calculations project has resulted in change freeze continuing longer than initially planned meaning staff are unable to make changes / developments to reports. |
| 68 | ICT: Hardware - monitoring and management of IT hardware | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Functioning, fit for purpose hardware - exception reporting - Annual statement to LT | On target | |
| 69 | ICT: SBC Shared Service - provide a full ICT support service across all disciplines to the SBC | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | Performance report to SBC on service provided | On target | Q3 - organised for SBC to achieve Cyber Essentials certification in Q4. |
| 70 | ICT: Security and cyber resilience - Annual refresher training for all staff on Cyber Security and IT Code of Conduct | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | S | - Appropriate use of ICT systems | On target | Q3 - rolled out 'how to report phishing emails at work', delivered strong password training and promoted iTECS resources / webinars for cyber security week. Staff took part in another round of iTECS simulated phishing email campaigns. |

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|----|---|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|---|-------------------------|--|
| 71 | ICT: Security and cyber resilience - Cyber Essentials re-certification | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | S | - Cyber Essentials re-certification achieved | Completed | Achieved re-certification in December 2022. |
| 72 | ICT: Security and cyber resilience - implement Public Sector Action Plan for Cyber Resilience, monitor actions and report | Access to justice | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | - Acceptable level of residual risk - Exception reporting to LT - Up-to-date Information and Data related Policies and Procedures | On target | Q3 - made improvements to Workpro VPN tunnel / firewalls. Achieved CE re-certification and implemented to Okta single sign-on. |
| 73 | ICT: Security and cyber resilience - Induction, training and user support | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | - Users operating all systems effectively | On target | Q3 - trained 2 new starts and 2 staff returning from long-term leave |
| 74 | ICT: Security and cyber resilience - IS installation (network) - monitor the maintenance of security and cyber resilience standards by contractor | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Regular meetings with business partner and annual service report. | On target | Q3 - supported implementation of upgrade to VPN tunnel and Okta single-sign on platform. |
| 75 | ICT: Technical Support - Level 1 ICT support - provided to ICT champs and staff, monitoring of ICT mail box, logging and tracking escalated calls with external contractors where required, providing IMSO support for eRDM system | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Appropriate response times for level 1 ICT requests - Escalated calls logged with external contractors in good time | On target | |
| 76 | ICT: Technical Support - Team ICT Champions - manage and support the network of Level 1 ICT support in teams. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | M | - ICT Champs informed and confident, providing support effectively to team members | On target | Q3,- the group supported the initial testing phase of the Workpro refactoring calculations project and the preparations for the launch of call recording. Also supported their teams through an eRDM upgrade and upgrading to M365. |
| 77 | ICT: Technical Support - Video conferencing tools - provide support and administration for executive level on-line meetings | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - Appropriate communication channels available for LT/Management to complete their roles and responsibilities | On target | |
| 78 | ICT: Telephony - monitoring and management of telephony network and hardware, including mobile communications and connectivity; providing technical support where required. | Accessibility | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | - telephony functionality available for staff to complete their roles and responsibilities | On target | |
| 79 | Information Governance: Breach response and monitoring - manage, record, review and monitor data security incidents and personal data breaches | Standards | BAU | As required | 01/04/2022 | 31/03/2023 | S | - effective incident management - quarterly updates to Leadership Team | On target | |
| 80 | Information Governance: Compliance - monitor data protection and information governance compliance (e.g. security and records management, risks, data processors etc.) and test the effectiveness of measures, and adherence to policies and procedures (and contracts) | Standards | BAU | Continuous | 01/04/2022 | 31/03/2023 | s | - quarterly assurance reporting to LT - data protection and information governance audits and compliance checks reported to LT | On target | |
| 81 | Information Governance: Data protection fee - review and update details and pay annual fee to the Information Commissioner (ICO) | Standards | BAU | Annual | 01/11/2022 | 28/11/2022 | S | - fee paid | Completed | |
| 82 | Information Governance: Data Protection Impact Assessments - carry out screening checklists and DPIAs of new and high risk processing, and review existing DPIAs | Standards | BAU | As required | 01/04/2022 | 31/03/2023 | s | - signed off by LT | On target | |
| 83 | Information Governance: Data Protection Officer - review and update DPO service Memorandum of Understanding | Standards | BAU | Annual | 01/04/2022 | 31/06/2022 | S | - MoU signed | Completed | Current MoU signed 30/09/21. DPO confirmed does not require to be updated for new DPO in 2022. Will be revisited in 2023. Normally reviewed every 3 years. |
| 84 | Information Governance: FOI and EIR statistics - submit data to Scottish Information Commissioner about our requests to see how FOI is used in Scotland, for publication. | Standards | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | - stats submitted to SIC | On target | |
| 85 | Information Governance: Freedom of Information - log, track, monitor, and deal with FOI/EIR requests and reviews within statutory timescales | Standards | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - reporting performance against statutory target of 20 days | On target | 100% FOI requests responded to within timescales in Q1; 100% in Q2; 97% in Q3 |
| 86 | Information Governance: Individual rights - log, track, monitor, and deal with data protection requests and complaints within statutory timescales | Standards | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - reporting performance against statutory target of one month | On target | 96% DP requests responded to within timescales in Q1; 96% in Q2; 100% in Q3 |
| 87 | Information Governance: Information asset register - review and update the asset register, and risk-assess information assets | Standards | BAU | Annual | 01/10/2022 | 31/12/2022 | S | - up-to-date register - report to LT in line with governance arrangements | C/F to next year | Postponed due to potential overlap with data maturity project (see also ROPA activity CS92). |

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|-----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|---|-------------------------|--|
| 88 | Information Governance: Leadership and oversight - data protection and information governance assurance reporting | Standards | BAU | Quarterly | 01/04/2022 | 31/03/2023 | h | - quarterly assurance paper - DPO assurance statements - reporting to AAC - Annual report and accounts - signed off by LT | On target | |
| 89 | Information Governance: Policies and procedures - review and update data protection and information governance policies and procedures (for e.g. FOI/EIR, rights, records management and security, breach management, business continuity, risks and DPIAs, data sharing, restricted transfers, purpose limitation, transparency, DP by design and default etc.) and supporting measures | Standards | BAU | Annual | 01/01/2023 | 31/03/2023 | S | | On target | |
| 90 | Information Governance: Publishing information - review and update SPSO Publication Scheme (incl. Re-use, and Open data) | Standards | BAU | Annual | 01/10/2022 | 31/03/2023 | S | - publication scheme compliance reported to LT | Not started | Originally scheduled for Q3; moved to Q4. |
| 91 | Information Governance: Records Management Plan - Review and update our RMP | Standards | BAU | Annual | 01/04/2022 | 30/06/2022 | s | - progress update review submitted to Keeper of Records Scotland | Completed | PUR submitted and final report published. |
| 92 | Information Governance: Register of processing activities and lawful basis - carry out information audits (or data mapping exercises), and review and update the ROPA | Standards | BAU | Annual | 01/10/2022 | 31/12/2022 | S | - report to LT | C/F to next year | Postponed due to potential overlap with data maturity project (see also Info asset register activity CS87). |
| 93 | Information Governance: Retention and disposal - ensure retention and disposal of casework documents in line with policy (non-casework automated in eRDM) | Standards | BAU | Quarterly | 01/04/2022 | 31/03/2023 | S | - annual assurance statement to LT - annual file location audit - 100% of hard copy case files located securely and correctly recorded on CMS - ad hoc updating as required | Slippage | File location audit started Q3, to complete Q4. |
| 94 | Information Governance: Training and awareness - review and update data protection and information governance training programme, provide induction and refresher training, and additional training for specialised roles, verify and monitor understanding, review and update guidance, and raise awareness of data protection, information governance and associated policies and procedures | Standards | BAU | As required | 01/04/2022 | 31/03/2023 | S | - evidence ALL staff receive induction/ update/ refresher training - annual declarations - training program signed off by LT | On target | |
| 95 | Information Governance: Transparency - review and update privacy information and notices | Standards | BAU | Annual | 01/10/2022 | 31/12/2022 | S | - report to LT | Slippage | Started |
| 96 | Ombudsman groups: contribute to OA (and other) special interest groups | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | L | - As required | On target | |
| 97 | Ombudsman groups: manage membership | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | L | - Representatives identified and resource available | On target | |
| 98 | Performance Reporting: Information governance - collation of quarterly statistics and year-to-date performance (FOI/EIR and DP rights requests e.g. SARs) | Standards | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | - quarterly analysis report to LT | On target | |
| 99 | Performance reporting: Professional advice - collation of statistics and year-to-date performance | Access to justice | BAU | Monthly | 01/04/2022 | 31/03/2023 | H | - quarterly analysis report to LT | On target | |
| 100 | Performance Reporting: UAP - monitor application and effectiveness | Access to justice | BAU | Monthly | 01/04/2022 | 31/03/2023 | H | - 6-monthly report to LT of effectiveness, including summary of who is being managed under policy, when it was applied, when review is due and who has been removed | On target | Reported quarterly to QCPM |
| 101 | Policy Handbook: all volumes - ensure reviewed and updated by owners, issued to LT for approval and published in line with policy review cycle and ensure effective dissemination | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | - Up-to-date, legally and standards compliant, policies and procedures - Annual self-certification by all staff | On target | |
| 102 | Policy Handbook: Complaints and investigations guidance and processes - review and update, disseminate through updates and training, and monitor practice. | Access to justice | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | Report to LT quarterly confirming learning captured and action taken and planned | On target | |
| 103 | Policy Handbook: Finance- review, update and ensure implementation of good governance arrangements. | Access to justice | BAU | Annual | 01/11/2022 | 31/03/2023 | S | - Internal audit report to LT | On target | Review completed, with LT for approval to publish in Q4 |
| 104 | Policy Handbook: Governance, risk and incident management policy - review annually in line with business planning process | Access to justice | BAU | Annual | 01/01/2023 | 31/03/2023 | S | - Internal audit report to LT | Slippage | Awaiting Omb suggestion for any changes to Risk section. |
| 105 | Policy Handbook: HR SBC volumes - review and update, disseminate through updates and training, and monitor practice. (3-yr. rolling review of volumes) | Access to justice | BAU | Annual | 01/04/2022 | 31/08/2022 | H | - Review undertaken, consultation with trade union and signed off by LT | Slippage | HR initial review completed Q2, policies currently with the TU reps for review and comment with further HR work needed |
| 106 | Policy Handbook: HR SPSO volumes - review and update, disseminate through updates and training, and monitor practice. (3-yr. rolling review of volumes) | Access to justice | BAU | Annual | 01/04/2022 | 31/08/2022 | H | - Review undertaken, consultation with trade union and signed off by LT | Slippage | HR initial review completed Q2, policies currently with the TU reps for review and comment with further HR work needed |

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|-----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|--|-------------------------|--|
| 107 | Policy Handbook: Information and Communication Technology (ICT): review, maintain and update ICT and digital Strategy and supporting guidance, particularly focussing on cyber security and resilience; disseminate through updates and training, and monitor practice. | Access to justice | BAU | Continuous | 01/10/2022 | 31/03/2023 | H | - Annual review undertaken and signed off by LT | Not started | |
| 108 | Professional Advice Service: Annual Report on advice service | Access to justice | BAU | Annual | 01/04/2022 | 30/06/2022 | M | Report on service | On target | |
| 109 | Professional Advice Service: deliver a well-resourced professional advice service | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | Continued reduction in the % of advice responses received in excess of 20 working days. (2016-17 Baseline 64.1%) | On target | 70% of advices returned within 20 working days in Q1 - 75% of advices returned within 20 working days in Q2 - 81% of advices returned within 20 working days in Q3 |
| 110 | Quality assurance: annual quality assurance plan proposal | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | H | Proposal paper to QCPM. | On target | |
| 111 | Quality assurance: Casework | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | H | - 95% of decisions correct - annual N77 report to LT of learning and action taken and recommendations for wider improvement initiatives | Slippage | Risk based Proportionality QA currently being carried out in Q4 |
| 112 | Quality assurance: Professional advice | Access to justice | BAU | 6 monthly | 01/04/2022 | 31/03/2023 | H | - Six monthly report to LT of learning and action taken, and recommendations for wider improvement initiatives | Completed | Advice QA completed. |
| 113 | Quality assurance: SWF decisions | Access to justice | BAU | 6 monthly | 01/04/2022 | 31/03/2023 | H | - 95% of decisions correct - Annual report to LT of learning and action taken and recommendations for wider improvement initiatives | Slippage | Planned for Q4/Q1 - date not agreed. |
| 114 | Quality assurance: Telephone | Access to justice | BAU | Annual | 01/04/2022 | 31/03/2023 | H | - Annual report to LT - assessment of quality of telephone calls against customer service standards. Actions taken and recommendations for wider improvement initiatives made | Slippage | To be carried out in Q4 (Guidance updated 22.09.22 to reflect changes that are to be looked at in QA). To commence end of January 2023. |
| 115 | Service standards - monitor performance against service standards using internal and stakeholder feedback, and benchmarking against other ombudsmen services as far possible, and identify and implement improvements, feeding back to ISE for public reporting purposes and | Standards | BAU | As required | 01/04/2022 | 31/03/2023 | M | - Qtrly reports containing performance against service standards data to Dir(Corp Serv) for inclusion in Casework Management Performance Group: learning captured, recommendations and details of action taken and planned - Results provided on time | Completed | Customer Surveying has been suspended during 21/22. Q1 and Q2 satisfaction survey reports presented to QCPM meeting. Annual customer and BUJ satisfaction survey result reports for 20/21 analysed by PSC managers and results and recommendations reported to LT. |
| 116 | Survey management: administration and advice on all electronic surveys issued, including Customer, BUJ, SWF, Staff, etc. | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | M | Support provided on request | Discontinued | LT decision to research external provider for major survey requirements. |
| 117 | Survey management: support the general use of MS forms for internal feedback surveys that don't require complicated analysis. | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | L | Climate Change Strategy complete and approved | On target | |
| 118 | Climate change duties: CCAT actions - Develop a carbon emergency strategy and organisational changes | Access to justice | Project | Annual | 01/04/2022 | 30/06/2022 | S | All staff job descriptions updated to support climate change | Slippage | Strategy currently being drafted, however there has been slippage on this due to competing staff priorities. Completed in Q4 moved to be complete in Q4 |
| 119 | Climate change duties: CCAT actions - include Carbon Management as part of responsibilities on Job Descriptions | Standards | Project | Project defined | 01/04/2022 | 30/06/2022 | M | Climate Risk Assessment and approved by LT to be reviewed quarterly | Slippage | moved to be complete in Q4 |
| 120 | Climate change duties: CCAT Actions - Manage Climate Risk Assessment | Capacity | Project | Quarterly | 01/04/2022 | 30/06/2022 | H | Updated on Job Description published on intranet. Key sustainable goals. Champion keeps Updated on sustainability | Slippage | Identified and carried out in Q4 |
| 121 | Climate change duties: Sustainable Procurement - Identify a Sustainable Procurement Champion to lead sustainable procurement with objectives, job description and stays updated | Capacity | Project | Continuous | 01/04/2022 | 30/09/2022 | M | Staff receive basic sustainability training at induction. Key Procurement staff receive advanced sustainability training | Slippage | Identified and carried out in Q4 |
| 122 | Climate change duties: Sustainable Procurement - Identify training to ensure procurement staff receive basic awareness training. Key Sustainable procurement staff receive advanced sustainability training to be qualified. | Standards | Project | Project defined | 01/04/2022 | 30/12/2022 | M | | Slippage | |

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| 123 | Climate change duties: Sustainable Procurement - Update the Procurement policy to include sustainability objectives and considerations; communicate the sustainable procurement objectives to relevant staff; and include sustainability requirements in contract considerations and update tender documents to include sustainability criteria when undertaking procurement exercises. | Standards | Project | Annual | 01/04/2022 | 30/06/2022 | M | Create and update sustainable Procurement strategy and policy. High level objectives. Staff briefings and updates. Engage with suppliers on sustainability and tenders | Completed | Updated in Q3 |
| 124 | Governance: Corporate Social Responsibility policy - draft policy document in conjunction with the COP, incorporating Fair Work Practice. | Access to justice | Project | Project defined | 01/04/2022 | 31/03/2023 | L | Draft policy issued to LT | Not started | |
| 125 | Governance: SBC Shared Service - Provide information, support and resources to assist SBC establish and robust public service organisation | Capacity | Project | Project defined | 01/04/2022 | 31/03/2023 | H | Performance report to SBC on service provided | On target | As required. |
| 126 | HR: Equalities and Human Rights - benchmarking | Access to justice | Project | Project defined | 01/04/2022 | 01/05/2022 | H | - Carry out TIDE benchmarking process (through ENEI membership) - Identify improvements and include in Annual HR report - Include improvement actions in HR plan, linked to survey and IIP actions | Slippage | TIDE benchmarking process completed in December 2023. Awaiting feedback and discussion with ENEI consultant to agree objectives and improvement actions |
| 127 | Service Standards: Equalities and Human Rights - Review our commitments outlined in SPSO BSL Plan to ensure best practice | Capacity | Project | Project defined | 01/04/2022 | | M | - Report to LT with recommendations | Completed | High level review of BSL plan conducted by comms and A&G, work identified incorporated in ISE accessibility business plan objective 23/34. |
| 128 | HR: Health and Wellbeing - develop Health and Wellbeing handbook with staff and manager guidance | Access to justice | Project | Project defined | 01/04/2022 | 30/06/2022 | H | Complete alongside wider HR policy review | On target | Links to 106 above, HR review complete, policies currently with the TU reps for review and comment |
| 129 | HR: Health and Wellbeing - Review mental health first aid provision | Access to justice | Project | Project defined | 01/04/2022 | 30/06/2022 | H | Report to LT with recommendations | Slippage | Scoping and research started in Q3 |
| 130 | HR: Learning and development - Development of an Interactive Online Skills Refresher Programme for staff training purposes giving priority for management development skills - scoping and testing | Capacity | Project | Project defined | 01/04/2022 | 30/06/2022 | M | - Report and recommendations to LT - Implemented training programme | On target | SPSO's Learning Hub launched in Q2. Q3 ongoing development of SPSO-specific content with first mandatory security training launched through the Learning Hub. |
| 131 | HR: Learning and development - Explore best practice mechanisms for further raising awareness of and access to learning and development opportunities, including external opportunities. | Capacity | Project | Project defined | 01/04/2022 | 30/06/2022 | M | Report to LT and include any recommendation within the IIP/staff survey action plan recommendations | On target | Links to 130 above, exploring mechanisms through the Learning Hub for sharing and promoting L&D opportunities |
| 132 | HR: Learning and Development - Review of competency framework and associated HR activities | Access to justice | Project | Project defined | 01/04/2022 | 31/03/2023 | M | - Updated and approved values-based competency framework - Update recruitment, performance management, learning and development processes and documents in line with outcomes | C/F to next year | |
| 133 | HR: Learning and development - review offering, giving consideration to setting a minimum offering/CPD requirement, and access to external development opportunities | Capacity | Project | Project defined | 01/04/2022 | 31/10/2022 | M | Project findings and recommendations | C/F to next year | |
| 134 | HR: Resources - Workforce Planning: develop a formalised Workforce Plan template outlining the current workforce, the future workforce and how the organisation can achieve its required future | Capacity | Project | Project defined | 01/04/2022 | 30/06/2022 | M | Template provided to LT for approval | Not started | |
| 135 | HR: Reward - review of staff benefits and reward mechanisms and raising awareness | Access to justice | Project | Project defined | 01/10/2022 | 31/03/2023 | H | Scoping and report to LT with findings and recommendations | Slippage | Scoping and research completed. Draft report and recommendations prepared in Q3 with aim that this will be finalised and shared with LT in Q4 |
| 136 | HR: Strategy - Develop and implement people strategy | Capacity | Project | Project defined | 01/04/2022 | 30/06/2022 | M | - People strategy to LT | Not started | Links to succession planning |
| 137 | Service Standards: Strategy - Develop Inclusion Diversity Equality and Accessibility Strategy | Capacity | Project | Project defined | 01/04/2022 | 31/03/2023 | H | - Inclusion and diversity strategy to LT | Not started | Priority for Q4. |
| 138 | HR: Strategy - Hybrid working trial and policy development | Capacity | Project | Project defined | 01/04/2022 | 31/03/2023 | H | - Monitoring of trial and feedback to LT - Development of policy as agreed in consultation with LT, staff, managers and trade union | On target | Future Working Group meets every other month, gaining informal feedback from team representatives which is fed back to LT to be incorporated into guidance. First survey launched in November and feedback currently being analysed |
| 139 | HR: Strategy - Organisational succession planning | Capacity | Project | Project defined | 01/04/2022 | 30/06/2022 | M | - Scoping, and report to LT with recommended plan | Not started | |

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|-----|---|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|---|-------------------------------|--|
| 140 | ICT: Applications - Case-handling system (Workpro) - Complete ICT user needs analysis to assess areas for additional training and support | Access to justice | Project | Project defined | 01/04/2022 | 31/03/2023 | M | Review submitted to LT | Not started | |
| 141 | ICT: Applications - Case-handling system (Workpro) - using the report and findings from CAS Anonymous Product Usage Tracking report and User Experience project, plan and implement agreed recommendations and training requirements for users. | Capacity | Project | Project defined | 01/04/2022 | 31/03/2023 | M | Recommendations and training implemented | On target | Recommendation to improve landing page and refactor calculations will be implemented in Q4 as part of performance reporting project. |
| 142 | ICT: Applications - Communication tools - training and support to embed MS teams and functions into the working environment for all staff. | Access to justice | Project | Project defined | 01/04/2022 | 31/03/232 | H | MS Teams training and guidance materials provided to staff on aspects to support roles and responsibilities | On target | Publicised iTECS arranged training sessions on Teams (e.g. breakout rooms). |
| 143 | ICT: Applications - Drive Management Change Project - manage the removal of local drives and Outlook public folders | Access to justice | Project | Project defined | 01/04/2022 | 31/03/2023 | H | All staff confirmed to have empty H drives Public folders transferred successfully to Shared email folders | On target | Phase one completed. Currently awaiting update from iTECS for timeline of phase 2 (removing Outlook public folders). |
| 144 | ICT: Applications - Office 365 project - support the migration from Microsoft Office applications to Office 365 | Access to justice | Project | Project defined | 01/04/2022 | 30/06/2022 | H | All staff able to access Office 365 applications to complete their roles and responsibilities | Completed | Q3 - issue with Workpro Outlook add-in resolved. All staff now upgraded to M365 with minimal issues. |
| 145 | ICT: Applications - Performance reporting Project - Develop tasks in case-handling system to be used in performance reporting calculations | Access to justice | Project | Project defined | 01/04/2022 | 31/03/2023 | H | Performance reporting meeting requirements - end of project notice submitted to LT | Slippage | Initial testing completed in Q3, however a system error identified has further delayed the project. Due to be rolled out in Q4. |
| 146 | ICT: Internal Support - review and evaluate effectiveness of ICT champion structure | Capacity | Project | Project defined | 01/04/2022 | 30/06/2022 | M | Project findings and recommendations Review submitted | Discontinued | Overtaken by formal community of practice / Groups structure. |
| 147 | ICT: Review arrangements and processes for working electronically to ensure these are efficient and fit for purpose including document scanning, editing, formatting and systematising formats SPSO accepts as submission | Capacity | Project | Project defined | 01/04/2022 | 31/03/2023 | M | | On target | Fin/ICT TA investigating options for document scanning with Advice Officer. |
| 148 | ICT: Security and cyber resilience - develop cyber incident playbooks to be used in cyber incident response item | Access to justice | Project | Project defined | 01/04/2022 | 31/03/2023 | M | Cyber incident playbooks approved by LT and published internally | On target | Approved by LT in Q2, sent to SBC CSM for checking in Q3. |
| 149 | ICT: Telephony project - explore using MS Teams for telephony for areas of organisation with low volume of calls | Accessibility | Project | Project defined | 01/04/2022 | 31/03/2023 | M | End of project notice submitted to LT | C/F to next year | Dependent on external provider - iTECS are concentrating on Drive Management and migration to Office 365 so this project has been delayed to 2023 |
| 150 | Professional Advice Service: Review the impact of moving to remote working and electronic processes on advice services through surveying of advisers | Access to justice | Project | Project defined | 01/04/2022 | 30/06/2022 | H | Report of findings and recommendations to LT. | Completed | This was provided in Q4 2021/22 |
| 151 | Quality Assurance: develop process and carry out QA of INWO cases | Standards | Project | Project defined | 01/04/2022 | | M | QA report | Slippage | Due to delays in setting up call recording |
| 152 | Quality assurance: Telephone - develop new telephone QA system making best use of new telephone technology and encouraging staff self reflection and coaching conversations. | Access to justice | Project | Project defined | 01/04/2022 | | M | Report of findings and recommendations to LT. | Slippage | Brought forward from last year. Dependent on call recording being set up. |
| 153 | Survey management: move formal organisation surveys to Smart Survey platform | Access to justice | Project | Project defined | 01/04/2022 | 31/12/2022 | L | Survey system moved to new platform | Discontinued | LT decision to research external provider for major survey requirements. |
| 154 | ICT: Cyber Security - contribute to iTECS Cyber Security Awareness Leads group | Access to justice | BAU | Continuous | 31/08/2022 | 31/03/2023 | M | Attend meetings, report to LT as required | In-year addition: on target | Q3 - rolled out 'how to spot phishing emails at work' video that was developed by this group. Took part in simulated phishing email campaign using emails with SPSO logo / details. |
| 155 | Training Unit ISE - training officer administrative support. Booking forms, invoices, handouts and updating of materials | Access to justice | BAU | As required | 01/04/2022 | 31/03/2023 | M | | Completed | Transferred to ISE team. |
| 156 | Corporate Services: Shared Services Project - set-up and provide finance services to the Scottish Human Rights Commissioner | Access to justice | Project | As required | 01/10/2022 | 31/03/2023 | M | New finance processes and procedures implemented | In-year addition: on target | New activity from Q3. |
| 157 | HR: Shared Services Project - set-up and provide HR services to the Scottish Human Rights Commissioner | Access to justice | Project | As required | 01/10/2022 | 31/03/2023 | M | New HR services implemented | In-year addition: on target | New activity from Q3. Currently preparing payroll system |
| 158 | HR: Accreditation - Achieve Carer First Accreditation | Access to justice | Project | Project defined | | | M | Accredited | In-year addition: unallocated | Less immediate benefit to achieving this and perhaps more thorough research into other types of accreditation that could be progressed ahead of this |
| 159 | HR: Business Continuity Planning - Scoping for moving to fully electronic HR service | Access to justice | Project | Project defined | | | M | Report to LT with recommendations | In-year addition: unallocated | Add as BP objective for next year if capacity allows |

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|----|--|----------------------------------|-----------------------|----------------------------|------------|------------|---------------------------|---|-------------------------|---|
| 1 | Develop communications plan for INWO function: to include engaging with external stakeholders, publicising outcomes and sharing learning/good practice. Implement (and monitor) the introduction of the Communications Strategy. | Accessibility | BAU | 6 monthly | 01/04/2022 | 31/03/2023 | H | Project scope signed off by LT. Comms strategy for INWO to identify types, methods and frequency of communications. Were communication(s) received by target audience? When/how did they access information? Are target needs being met? Preparation and publication of monthly compendium updates and as appropriate quarterly reports of other Comms/Inwo engagements. All appropriate stakeholders notified. Monitoring of feedback and Comms activity undertaken & reported. | On target | Q1: We have developed a plan for engagement and comms centered around the promotion of Speak Up Week in October. Plans for continual engagement with stakeholders will be put in place after Speak Up Week as we expect to learn from this activity which channels of engagement work best. Ongoing general comms, first investigation report yet to be published. Q2: INWO engagement and comms plan approved by LT. INWO engagement is now being tracked as part of the wider ISE engagement tracking for analysis at a later date. The first INWO report was published and publicised. Q3: Speak Up Week was successfully delivered with a range of stakeholder engagement activities. Initial outcomes and impact have been shared on the website, in LT papers and communicated to INWO stakeholders. The second INWO report was published alongside the December compendium. Q4: Plan to work with INWO team on development of resource materials. |
| 2 | Develop and refresh Engagement policy including a focus on external and internal engagement to support better service delivery, data gathering and analysis. | Accessibility | Project | Annual | 6/1/2022 | 3/31/2023 | H | Refreshed policy, guidance and training. Data gathered. | Completed | Engagement and Comms manager to scope out project. Q1: Policy referred to in the activity description will be the new Engagement and Communications Strategy which will outline the principles, aims and objectives of SPSO engagement and communications activity. Alongside this strategy, we will also develop an integrated Engagement & Comms plan for 22/23, bringing together all the activity across ISE for more effective planning. Q2: E&C strategy approved and shared with team and wider SPSO. Workj has started setting up for tackling some of the objectives in the Strategy, starting with a new approach to social media. ISE Engagement tracker launched. Q3/4: We continue to make progress on the objectives set out in the strategy. Q4 will focus on the planning and development of new approaches to our digital communications (e-newsletters and social media). Planning will also be underway for projects to be taken on in 23/24. The first review of the E&C strategy objectives and progress scheduled for February 2023. |
| 3 | Evaluation and Ongoing reflection of collaboratives (CoP). Monitored input from ISE and coordination of projects to working groups (governance input) ISE attend CoP meeting(s)/CoP rep attends sector network meeting. Data to be extracted to support secotr analysis. | Capacity | BAU | Monthly | 01/04/2022 | 31/03/2023 | H | 2022 Project completed. Sector reports. Meetings attended. Monitor governance of Collaboratives. Six and twelve month review - reflective collection on terms of references, how the approach is going, contacting all collaboratives for input | C/F to next year | Q1: Ongoing chase ups to ensure all TORs are in place, teams channel updated. Focus on approach for review for Q4. Q4: Review of CoPs has slipped due to competing priorities. We aim to review the focus and objectives of this project in Q4 as part of planning for 23/24 projects. |
| 4 | Data Plan & Strategy for ISE - workshop for managers on Data / Intel / Scrutiny | Capacity | Project | Project defined | 31/04/2022 | 31/03/2023 | H | Data Strategy will set out how, why and what we do with our data making recommendations and analysis from this. | On target | Q1: online research period, comms with external contacts from data summit, draft VVA document. Q2: comms with SG re cohort, potential for August start date. 23/08 - Confirmed place on DMPP. Sept workshop and one to one took place Q3: Workshop 2 taking place and working towards setting our ambition for DMPP. DMP project plan sent to LT for approval. Data maturity assessment w/c 21/11. Workshops taking place late Nov/early Dec. Q4: Research phase of the DMPP is complete and we will now focus on analysis of results from the workshops a DMA. We will then progress with the drafting of recommendations for the Data Strategy/Action Plan. |
| 5 | Review and improve SPSO prisoner communications products - need to ensure accessibility for prisoners to SPSO. Pilot project to be developed through the prisons collaborative | Accessibility | Project | Project defined | 01/04/2022 | 31/03/2023 | L | Review of Prisons communications refresh and pilot project scoped out and developed through to implementation of recommendations where possible within remit | C/F to next year | ISE officer to collaboarte with prisons collaborative once up and running - likely to be Q4 Q4: Prisoner collaborative launching in January 2023. EO will sit on this collaborative and work with ECM to review the objectives of this project for 23/24. |
| 6 | Monitor and manage SPSO's public profile. | Accessibility | BAU | As required | 01/04/2022 | 31/03/2023 | H | Media monitoring – number of media mentions, media types,planning to introduce better/more regular reporting on Comms activity / ROI - Engagement with SPSO newsletter, social media - Web traffic | On target | Q1: Quarterly report will be issued to LT in July 22. Q2: Quarterly report will be issued to LT in early Oct 22. Q4: E&C team are launching a new working process for social media which includes a new reporting process. ECM to develop plans for a new proactive approach to media relations (inc. monitoring/reporting) to implement in 23/24. Current reporting process has paused during this period. |
| 7 | Compile and Publish monthly compendium. | Accessibility | BAU | Monthly | 01/04/2022 | 31/03/2023 | S | Compendium prepared to time and quality standard. Compendium published on time. planning to introduce better/more regular reporting on Comms activity / ROI (including standards) | On target | Q1: Compendium published on time. Q2: Compendiums published on time. Q3: Compendiums published on time. Q4: plan to continue as above. |
| 8 | Compile, draft, coordinate and Publish Annual Report and Accounts 2021-22 | Capacity | BAU | As required | 01/04/2022 | 31/10/2022 | S | Publish Annual Report and Accounts: Draft report by June 2021 Final report prepared for September 2021, Annual Report and Accounts 2021-22 laid before Parliament October (and published) 2022 | Completed | to be publish by 31/10/22 this is the statutory date Q1: initial draft complete Q2: performance report ready for publication - accessible digital version in production - on track for publication end of October. Q3: Annual report published and presented to Committee by LT. Q4: ECM and CO to review style of next AR. |
| 9 | A. Communications support for other internal business areas' BAU | Capacity | BAU | As required | 01/04/2022 | 31/03/2023 | M | Support provided as required subject to resource availability and other priorities. | On target | Q1: Support HR with launch of new online training platform Q2: Ongoing support for other business areas including website and leaflet updates. Comms have launched new service request tracker. Q3/4: New service tracker working well and all request for suppot picked up and dealt with in a timely fashion. |
| 10 | B. Communications support for other internal business areas' projects and improvement development | Capacity | Project | Monthly | 01/04/2022 | 31/03/2023 | M | Support of at least 1 day per month for the development of improvement plans and projects led or initiated by other team - dependant on priorities, available resources and LT approval of project proposals | On target | Q1:Development of online complaints webform in testing stage with A&G. Development of info leaflet 3 with SIF. Q2: Creation of SWF SIP leaflet complete. Met with rep from health COP to discuss development of health specific complaint form. Working with A&G to develop satisfaction survey project. Q3/4: Ongoing support. |
| 11 | Complaints handling: engage with public bodies to provide advice, guidance and support on all aspects of good complaint handling and a positive complaints culture. | Standards | BAU | As required | 01/04/2022 | 31/03/2023 | S/H | Will mostly be done through responses to BUJ enquiries (see line 14). Will also be done via good practice updates on SPSO website and at network meetings. Reported in SPSO Annual Report. | On target | Q1: ISEROs continue to engage as outlined in description Q2: ISEROs continue to engage as outlined in description |
| 12 | Standards support advice and awareness for internal business areas | Standards | BAU | As required | 4/1/2022 | 3/31/2023 | S/H | Support provided as required subject to resource availability and other priorities. | On target | This is a reactive BAU that can evolve into projects which can impact on resources Q1: ISEROs continue to engage as outlined in description Q2: ISEROs continue to engage as outlined in description |
| 13 | Monitor and respond in a timely manner to all ISE mailboxes | Accessibility | BAU | Continuous | 31/04/2022 | 3/31/2023 | H | Inboxes will be monitored. Responses will be actioned and high levels of communication and customer satisfaction. | On target | Q2 update: New TA role will triage, respond and allocate all mailbox queries. DL /SOD contacted ICSCR to advise him to use the ICSCR mailbox going forward so both can pick up any queries. Q3: New TA in post and training on ISE mailboxes. Q4: Continue to develop TA knowledge for mailbox triage. |

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| 14 | Support/play an active role in sector wide complaints networks. | Standards | BAU | As required | 01/04/2022 | 31/03/2023 | H | SPSO (ISE) presence at each of the sector network events held through the year | On target | This is a blend of planned and reactive BAU that can evolve into projects which can impact on resources. Q1: HoISE, ISERO and ISERO(CF) attended LACHN meeting in April; ISERO and ISERO(CF) attended LACHN in June. ISERO facilitated WB Pract Forum in April; and, attended NCPAS in May, and NCPAS Debrief and Housing Network in June. Q2: ISERO and ISERO(CF) attended HE Complaints Forum in August. |
| 15 | Support an integrated approach to Standards advice, Learning and Improvement and informal training including sharing best practice. Ensure awareness for internal business areas in addition to external engagement. | Standards | BAU | As required | 01/04/2022 | 31/03/2023 | H | Support provided as required subject to resource availability and other priorities. Development of integrated model. | On target | This is a reactive BAU that can evolve into projects which can impact on resources. Q1: as noted elsewhere, Standards BAU continues as normal, which includes informal training in the form of engagement with orgs on complaints standards/MCHP issues. Learning & Improvement work pending progress on SIP training for ISE staff. Q2 Update: ISE team day set out VVA, mission statemtn and job role descriptors these are being finalised. 12/24 month goals will be used at ISE team meetings and BP planning to inform. |
| 16 | Conduct data analysis to monitor performance and gather intelligence to support findings. Quarterly meetings with Heads of/Managers prior to Casework Performance Meetings for oversight understanding of quarterly performance results. Performance reporting: Internal and external reporting of complaints and investigations data - collation of statistics and year-to-date performance. | Capacity | BAU Plus | Continuous | 01/04/2022 | 31/03/2023 | S/H | Monthly : Recommendations & Feedback Database Quarterly : Dashboard, BUJ Themes & Trends, ISE Report, Covid-19 tracker, Sharing Ingelligence, SIP reporting, CSC Dashboard and CSC Report, CSC audit tracker (new) Annual : Dashboard, Annual Statistics catalogue, Top Level PSC Stats, SIHCG master tables, Annual Report input for Learning from Complaints, Stakeholder Engagement and CSC | On target | Ongoing data intel and collation in support of reporting. Q2 update: Report templates to be rolled forward ready for Q2 data input. Feedback / suggested changes from Q1 reports to be included in Q2. |
| 17 | Policy and legal support for other internal business areas | Capacity | BAU | As required | 01/04/2022 | 31/03/2023 | M | Support provided as required subject to resource availability and other priorities. | On target | |
| 18 | Customer Service Complaints, monitor and report on performance in service complaints handling. SIP reporting to be included in BUJ themes and trends on a separate tab for all levels showing actions taken. Linked to LT issue log | Accessibility | BAU | Quarterly | 01/04/2022 | 31/03/2023 | S/H | Preparation of quarterly customer service complaints reports presented to Leadership Team. Data TA and TA supporting development and fulfillment of reports. | On target | Comms to publish following sign off. New format CSC quarterly report to be replicated for Q1, further development expected for Q2. SIP - new Workpro drop down launched which should improve reporting. Q2 Update: DL has taken on CSC reporting. |
| 19 | Customer Service Complaints, liaise with the Independent Customer Service Complaints Reviewer ICSCR | Accessibility | BAU | Continuous | 01/04/2022 | 31/03/2023 | H | Respond to ICSCR requests in a timely manner as required of ICSCR. 3 weekly catch up with ICSCR. | On target | Q1: TA supporting collation of data on CSCs including time spent for TA and ICSCR. TA developing shared workspace to cut down on time. Q2 Update: Connect workspace in place for ICSCR to use to access files. Random file read will take place in Oct / Nov. |
| 20 | Training plan: Refresh, research and development of formal training materials and courses. Including INWO training plan and delivery. | Accessibility | Project | As required | 01/04/2022 | 31/03/2023 | H | Develop and refresh training plan for external open courses and integrated training approach. Investigations training to be reviewed in line with developing INWO training. Scope out demand & best delivery. Development of internally supported model | Not started | Q1: Discussions with INWO ISE staff. Q2/3/4: See updates in BP24 |
| 21 | If case volumes allow work with NHS boards to develop INWO related training materials based on needs. | Capacity | Project | Project defined | 31/04/2022 | 3/31/2023 | L | Training development and refinement of TURAS modules | Completed | Materials updated to April 2022. New training programme for line managers developed and delivered. Project can now run as BAU. |
| 22 | Refine INWO related training materials based on feedback | Capacity | BAU | Monthly | 31/04/2022 | 3/31/2023 | L | Refinement of TURAS modules | On target | User surveys analysed monthly. Changes made as necessary. Q2: feedback analysed. No updates required. |
| 23 | INWO stakeholder Engagement | Access to justice | Project | Project defined | 31/04/2022 | 31/03/2023 | H | Focus on areas of priority, link officers to Eng Manager Activities to include: Launch of speak up week (Oct 22) Launch of toolkit (early 23) | On target | Officers link with INWO and Eng Manager. Q1 project defined as: 1. Developing a resource toolkit for BUJs to use to publicise the Standards more effectively in their organisations (supported by training if necessary). 2. Developing a speak up week for October 22 - in line with NGOs work on speak up month. SUW agreed by LT and comms/engagement plan developed with Eng Manager. Engagement with BUJs started. Development of logo/poster designs started. Q2: SUW resources in development in collaboration with external partners, INWO and comms. INWO leading on stakeholder engagement for SUW. Engagement with Boards through emailed comms, webinars, information sessions and meetings with network chairs. Plans for INWO celebrations for the week in development - organising speakers for webinars, drafting daily quotes and blog posts. 17/10 - Speak Up Week was a great success, initial analysis of social media from Comms shows a significant increase in engagement compared to our normal social media stats. Interaction with most (if not all health boards). Follow up meetings with boards in early November to gather feedback and reflections on the week and asked boards to report on what they did - used to inform our own paper and look for shared learning. Next stage - develop a resource pack for boards to use with staff training and induction. Interest from 4 Boards to work with - a mixture of special boards and territorial boards. Plan is for these resources to be co-created |
| 24 | Deliver SPSO training products / Training PLAN | Capacity | BAU Plus | As required | 01/04/2022 | 31/03/2023 | H | Developed from training plan. Provide quarterly updates on training delivery and as a result, cost recovery of booked training to support ISE team functions | On target | Short project options paper has went to LT, this is being further refined and will be resubmitted. Q1: Training plan submission to LT 080622 Q2: Refined LT training paper 31/08. Development of online GCH training - prototype run through with Dan 30/08 - CIS condensed and ready for review by AS, JG, CSA team etc. Q3: AS ran information workshop 3/10 - SOD to finalise CIS content ahead of one to one practice sessions. CIS spaces nearly full - ten places left. GCH in testing phase. Q4: GCH and CIS Training launched with online registration. Monitor and develop following ongoing user feedback. |
| 25 | INWO monitoring of standards & application of SIP | Standards | Project | Project defined | 31/04/2022 | 31/03/2023 | H | Develop monitoring of standards for INWO. Allocation and overview of tasks | Not started | INWO officers and ISE officers to collaborate Q2: delay due to in-year projects taking priority. Meetings scheduled with INWO and ISE to collaborate. |
| 26 | Develop methodology for monitoring standards | Standards | Project | Project defined | 01/04/2022 | 31/03/2023 | S/H | Sampling BUJ annual report data, based on MCHP KPIs. | Not started | Refreshed MCHP KPIs from 1 April 2022 published - first report date is October 2023. INWO KPIs already published as part of National WB Standards. To be determined if/when SWF incorporated into ISE monitoring, subject to resources. Q1: Agreed with HoISE that ISEROs to scope out method for using publicly accessible complaints data from orgs, in line with MCHP Part 4; aiming for initial outline scoping document to HoISE by end Q2. Q2: delay due to in-year projects taking priority, also allowing time for assessment of BUJ annual reports in October, aiming for scoping document in Q3. |
| 27 | 20/21 REVISED Seek extension to SPSO powers - revise Wider review of SPSO powers - (e.g. incorporating Venice Principles work) | Accessibility | Project | Project defined | 01/04/2021 | 31/06/2023 | S/H | Specifically in short term PSRO (Public Service Reform Order) as appropriate. Potentially, a report to be laid before parliament. | On target | Q1: On track for Q2 completion, to contribute to development of letter/paper for LG,H&P Cttee. Q1: Draft summary of SPSO compliance with VPs sent to Omb & LPO. Q2: ISERO work completed in Q1, LPO supporting work on paper to Scot Parl Cttee |
| 28 | Project: SPSO Change Control process. Two main work streams: 1. review identify and catalogue all SPSO products produced on same format as public authority publication scheme; 2. Develop product change control policy/procedure. | Capacity | Project | Project defined | 01/04/2022 | 31/03/2023 | M | Project scope prepared and signed off, change control process developed for LT sign off. | C/F to next year | This project is on our want to do list, pending full team strength it may be taken forward mid year. Q1: given organisation-wide operational significance of this project, agreed with HoISE to c/f to next year pending available dedicated ISERO resource to be used as a project officer to carry forward full time for a limited period. Q2: LT request for catalogue of products this business year, ISEROs to draft work plan for incoming TA |
| 29 | INWO - lead on introduction of whistleblowing practitioners network | Standards | BAU Plus | Project defined | 01/04/2022 | 31/03/2023 | M | Support WB Forum until a chair can be found to take over running. | On target | Once chair is found from NHS, this item will be completed and move to BAU along with existing BUJ networks (see line 16). Q1: ISERO facilitated April meeting of WB Pract Forum; next meeting tentatively scheduled for mid-Q2, ISERO will facilitate pro tem. Q2: next meeting to take place towards end of Q2 to allow for staff leave |
| 30 | Review ISE resource requirement, plan, prepare and run ISE recruitment as required. | Capacity | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | Recruitment needs agreed by LT. | On target | Q1: ISE team will be at strength by end Q2, JB&ML started, AF return from mat leave. Q2 Update: ISEROs are now above the previous level of grade 3 officers. TA has resigned and JD is being developed to be advertised. Options being explored to increase TA support capacity. |
| 31 | Performance Reporting: Annual stats - preparation and data cleansing Stats production and checking | Access to justice | BAU | Continuous | 01/04/2022 | 31/03/2023 | S | Published on website | Completed | 2021-22 Annual stat reports prepared and passed to Comms for checking and publication. Annual stats published May 2022 |

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| 32 | Information Management - build and maintain statistical reports from case-handling system (Workpro) | Capacity | BAU | Continuous | 01/04/2022 | 31/03/2023 | S/H | Scheduled reports accurate and issued on time | On target | Workpro upgrade needed, this is on Copr Services BP before reports can be updated with task function. Q2 update: DL assisted with creation of new A&G advice codes report. |
| 33 | Develop & Support Child Friendly complaints. | Access to justice | Project | Project defined | 01/05/2022 | 31/03/2024 | S/H | Project scope to be refreshed by ChF officer. Project plan to be developed. Stakeholder engagement. Ch F complaints procedures and guidance developed. | On target | Ch F officer started end April 2022. Project plan currently in development. Q2 updates Project planning and Research phases complete. Engagement work ongoing throughout Q2. |
| 34 | Develop project plan for child friendly complaints project | Access to justice | Project | Project defined | 25/04/2022 | 31/05/2022 | S/H | Approval by LT. Key deliverables. | Completed | Project plan completed and approved by LT. Details of key stages collected into sub projects below |
| 35 | Carry out research to inform child friendly complaintr project | Access to justice | Project | Project defined | 01/06/2022 | 31/07/2022 | S/H | Approval by LT of research report, stakeholder matrix. | Completed | Research report and stakeholder matrix completed and approved by LT. |
| 36 | Carry out stakeholder engagement to co-design new child friendly complaints process | Access to justice | Project | Project defined | 01/08/2022 | 31/10/2022 | S/H | Approval by LT of plans and reports, as well as final guidance for consultation. Testing phase to ensure new process is robust. | On target | Idea generation workshops complete. Testing workshops ongoing |
| 37 | Carry out formal consultation on new child friendly complaints MCHP | Access to justice | Project | Project defined | 01/11/2022 | 31/12/2022 | S/H | Consultation findings analysed and presented to LT, along with any required amendments to proposed MCHP | On target | Phase not yet begun, co-design ongoing |
| 38 | Publish and implement new child friendly complaints MCHP | Access to justice | Project | Project defined | 01/01/2023 | 01/04/2023 | S/H | Suite of monitoring KPIs to be produced for new process ahead of launch | On target | Phase not yet begun, co-design ongoing |
| 39 | Communications work stream recommendadtions and finalising last years project. | Standards | Project | Project defined | 01/03/2022 | 31/03/2023 | M | Individual Project driven, outcomes from LT paper | On target | Comms workstream - paper signed off by LT. Some recs completed, others to be taken forward by new comms manager. Q1: Some aspects will be picked up in the development of a new Engagement and Communications Strategy. Specific activities to be developed later in the year. Q2: Recs made in E&C strategy includes a focus on the future of the intranet and migration to Teams. Will be mapped out before end of year. Q4: ECM to review plan for internal comms and scope new project outline/objective for 23/24. |
| 40 | Calendar deadlines for all ISE team to be checked and up | Standards | BAU | Quarterly | 01/04/2022 | 31/03/2023 | H | All Calendars within ISE show clearly dates for publication | On target | Ongoing development of calendar, reviewed quarterly, monitored and updated accordingly. |
| 41 | ISE overview document | Accessibility | BAU | Annual | 01/04/2022 | 31/03/2023 | L | Update and maintain ISE overview document. | On target | When staffing complement is back to full strength paper will be refreshed. Q2 Update: ISE team day has set the baseline for this, VVA, Mission statements and job role descriptors being finalised. |
| 42 | Sharing Casework Intelligence COP information/learning with Reviewing Officers to ensure learning improvement or SIP work is effective | Standards | BAU | Continuous | 31/03/2022 | 31/03/2023 | M | Ensure casework intel feeds into learning and improvement work | On target | Casework Intel Group meeting held, initial projects still to be determined. Q2 update: recent meeting held, no projects determined. |
| 43 | ICSCR engagement and efficiency of data and intel transf | Standards | BAU Plus | Monthly | 01/04/2022 | 31/03/2023 | M | 3 weekly meetings with HofISE and ICSCR, new shared workspace for data transfer to be implemented. Updated CSC reports to reflect intel. | On target | TA has taken forward project to look at shared workspace and implementation of ICSCR mailbox. New audit tracker to developed. Q2 update: ICSCR now using mailbox for DL/SOD to access any requests, the shared workspace will be trialled for the next Stage 3 CSC received. DL/SOD currently drafting CSC Admin process note. |
| 44 | Build capacity throughout office in knowledge sharing, and monitoring performance through information from SPSO casework management system | Standards | BAU | Project defined | 01/04/2022 | 31/03/2023 | S/H | Identifying opportunities and supporting initiatives to build confidence and skills within office to run statistical reports and/or draw down information from casework management system. | On target | Planning meetings with Stats Group to understand their stats usage in other areas of SPSO, meetings to be held Q1/Q2. 15/06 PSC meeting - set up subscription for weekly reports and use graphs in reporting. Q2 update: pre-QCPM meetings held with Heads Of to review Dashboard and develop understanding / build knowledge. |
| 45 | Resolutions Project WG development | Standards | BAU Plus | Project defined | 01/04/2022 | 31/03/2023 | H | Continue to support BUJs on resolution, ensure focussed engagement of this language. This could then be used as the basis for SPSO making formal recommendations involving mediated approaches going forwards. | Completed | Q1: wording for website drafted, with Inv Mgr for comment, will be passed to Comms for uploading once wording confirmed; aiming for completion by end Q2. Remainder of resolutio support work covered in BP lines 13, 16 and 26. Q2: wording for website agreed with Inv Mgr, wording uploaded to SPSO website by Comms. Updated approach to resolution now included in SPSO training for BUJs. All actions now completed. |
| 46 | Style Guide and accessible infomration for all | Accessibility | Project | Project defined | 01/04/2022 | 31/03/2023 | H | Develop a style guide for internal use and external communications. Develop accessible webpages including BSL / signing to videos. Ensure that SPSO content is accessible to all | On target | Q1: Comms Officer to start research in Q2. Q2: Intital brainstorming started to review our guides, templates and how they are implemented across SPSO. Next step to work on project plan for delivering a refreshed brand/style hub for greater consistency across SPSO. Comms officer taking forward and developing project plan early in Q3. Q3: Project plan and scope approved by LT. Q4: Focus on delivery of project plan with aim to launch new brand and style hub by end of business year. |
| 47 | Process notes to be developed for all reports | Standards | Project | Annual | 31/04/2022 | 01/06/2022 | H | Process notes will be available to produce all ISE reports. Reviewed and updated annually | Completed | On target to be completed in Q2 2022/23. Q2 update: process notes were reviewed and updated as part of Q1 reporting and new CSC Reports process notes added. Process notes for all reports are now available and will be reviewed and updated each quarter. |
| 48 | SIP Refresh training & Refresh SIP | Standards | Project | Project defined | 31/04/2022 | 01/09/2022 | H | All ISE staff and Heads Of to be included in refresh training. SIP to be refreshed in light of resolution work. | Not started | Identify best placed officer to lead training. SIP to be refreshed by officers / data Q1: HoISE confirmed SIP update mainly relates to INWO (see line 27) as well as in relation to resolution work; awaiting confirmaiton of best placed officer to lead SIP training before delivering SIP-related L&I tasks. Q2: no progress to date in Q2 due to lack of resource, will revisit with INWO CRs in Q3 after Speak Up week |
| 49 | Develop/refresh protocol for dealing with new BUJs | Standards | Project | Project defined | 31/04/2022 | 01/09/2022 | M | Either create new protocol, or refresh existing protocol, for introducing new BUJs (and possibly OBOs) to SPSO and their complaints handling responsibilities. | Not started | Although new BUJs are not common, there is a risk in not getting it right first time in our interactions with new BUJs. Q1: ISEROs discussed with HoISE - now ISERO resource has increased, aim to share draft outline protocol with HoISE by end Q2. Q2: aiming for outline draft by end Q2/early Q3 |
| In year Projects | | | | | | | | | | |
| Y1 | NHS Good Complaints Handling Guidance | Standards | BAU Plus | Project defined | 01/07/2022 | 31/03/2023 | M | Develop GCH materials for NHS Boards that take account of key points in the updated MCHPs for other sectors, with a view to: updating Boards on developments in good practice in complaints handling since the NHS CHP went live in 2017; and, preparing them for the updated NHS CHP in the coming years. | h-year addition: on target | ISEROs to analyse key difference between NHS CHP and updated MCHPs to identify key points of good practice. ISEROs to work with Comms to develop GCH materials for Boards. Q2: initial work started as above, to be progressed in more detail during remainder of Q2 and into Q3 |
| Y2 | Tender scoping document for design services | Accessibility | Project | Project defined | 01/07/2022 | 31/10/2022 | H | Develop and scope out a tender for new design services | Completed | Q2: Comms officer preparing draft tender document for review by LT. ECM researching InDesign training courses for officers to bring basic functions in house. Q3: Tender document reviewed and approved by LT. Tender to take place in 23/24. |
| Y3 | Training support & advice for other internal business areas' projects | Capacity | Project | As required | 01/04/2022 | 31/03/2023 | M | Support provided as required for training development to support value added / new guidance or policies across SPSO and external | h-year addition: on target | |
| Y4 | Impact analysis review | Accessibility | Project | Project defined | 01/08/2022 | 31/03/2022 | M | LT noted there is a wider piece of work to review the various Impact Analyses with a view to simplifying them, making them more consistent and easier to use (e.g. using Forms). | h-year addition: on target | |
| Y5 | Update CSC to align with MCHP | Standards | Project | Project defined | 01/08/2022 | 31/03/2022 | H | CSC, as out procedure for dealing with service complaints, must align with published MCHP (SG etc model) | h-year addition: on target | Q2: HoISE request to produce scoping paper, will go to LT later in Q2/early in Q3 |
| Y6 | Review of non-data protection impact assessments | Accessibility | Project | Project defined | 01/09/2022 | 31/03/2022 | M | Revised and refreshed documents shared with staff | h-year addition: on target | |
| Y7 | Tracking CSC recommendations / actions | Standards | Project | Project defined | 05/09/2022 | 30/09/2022 | M | Fortnightly report for LT to track CSC recommendations and findings | h-year addition: on target | Q2: added Recommendations to CSC Received and Closed report for manually tracking cases, draft report to AS for comment - new CSC case type will track this |
| U1 | Work with SWF to develop web tools, resources and training materials for LAs, to improve practice and promote learning | Capacity | Project | Project defined | 31/04/2022 | 3/31/2023 | L | | In-year addition: unallocated | SWF to lead need to link with our training plan development |

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| U2 | Create complaints handlers forum for water proviers | Standards | Project | Project defined | 31/04/2022 | 3/31/2023 | L | Consider creating a good practice forum (not a network) run by ISE with support from PSC for water providers. | year addition: unallocated | Forum will meet infrequently, to emphasise and supplement good practice materials |
| U3 | Introduce Network of network chairs to share good practice across sectors and act as a sector Sounding Board in the way that SPSO interfaces with public bodies | Standards | Project | Project defined | 4/1/2022 | 3/31/2023 | L | Project scope signed off by LT. Network chairs consulted and terms of network identified and agreed. | year addition: unallocated | C/F to 2022/23. Need project rationale devised and agreed principles around this (possibly in with review of CoP). Confirm with ISE Officer that Collaboratives have picked this up |
| U4 | Review Case assessment form | Standards | Project | Project defined | 4/1/2022 | 3/31/2023 | M | Revised case assessment form to direct consideration at the start to identify if there is a possibility of good or poor complaints handling. | year addition: unallocated | Based on feedback and analysis this would add value and enhance data collection. Would allow CRs to pick this up in addition when assessing cases. |
| U5 | Development of digital profile | Accessibility | Project | Project defined | 4/1/2023 | 3/31/2024 | H | | In-year addition: unallocated | Brainstorming session to be put in before end of year |
| U6 | Review Customer Service Standards | Standards | Project | Project defined | 4/1/2022 | 3/31/2023 | M | Review wording to simplify and streamline and allow better data collection / application of the standards. Ensure that template letters at stage 2 link directly in wording to the standard being referenced. | year addition: unallocated | Template letters can be incorporated into BP item above. |
| U7 | SPS Residential First Line Manager CH Practitioners Network | Standards | Project | Project defined | 10/1/2021 | 3/31/2022 | L | Collaborative approach agreed with SPSO LT (for CR involvement) and with the SPS. Working jointly with 'expert CR' Terms of reference for network identified and agreed. Network introduced as BUA with support from ISE/Standards staff. | year addition: unallocated | C/F to 2022/23. Will need existing networks functioning properly first. Also, SG network is higher priority (SSSC are interested in setting up SG network). |
| U8 | Training - annual review of the emails/ slides/ handouts by trainers Training - partial duplication of content in GCH and CIS training courses | Standards | Project | Project defined | | | L | Emails/ slides/ handouts remain up-to-date and relevant Attendees not attending both GCH/CIS courses in one year | year addition: on target | The plan to share information with Bodies Within Jurisdiction (BWJ) should include this information. Q1 : Plan with LT for initial agreement then full scoping and development can take place. |
| U9 | NHS MCHP review and revision | Standards | Project | Project defined | 3/1/2022 | 3/31/2023 | S/H | Project to follow similar scope to previous revisions of MCHPs, but with key involvement of SG given their ownership of NHS CHP. Will need additional focus on Primary Care and Prison Healthcare. | year addition: unallocated | Update from 220512 NCPAS - SG comment that review cannot begin until Patient Safety Commissioner Bill is passed and it is clear what role the Commissioner will have in relation to patient dissatisfaction. |
| U10 | Revisit Quarterly basic data set? | Standards | BAU Plus | Project defined | 4/1/2023 | 3/31/2024 | H | Can we have a pilot with a sector to upload basic MCHP data that will generate the opportunity for us to look for themes and trends and then put in support | year addition: unallocated | |
| U11 | Develop guidance around delays | Access to justice | Project | Project defined | | | | Guidance to aid in assessing delays (for surgery 1st but potentially can be used for all sectors) around; General CV delays, specific circumstances to waitlists etc, different circumstances mostly in relation to poor or lack of communication. | year addition: on target | Write out later in the year with this guidance / take through the networks. Focus on cause and effect of delays. |